ONTARIO

Report of the Joint Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Social Housing and Child Care

[All documents in .pdf format, download Acrobat reader]

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For copies in French please call (416) 325-5320

Ministry of Community and Social Services

101-00320/

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March 8, 2000

Dear Chief Administrative Officer:

Re: Final Report of the Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing

In early 1999, the province, in conjunction with the Association of Municipalities of Ontario and the Ontario Municipal Social Services Association, created a staff Working Group to prepare a report on financial testing and access to Ontario Works, Child Care and Social Housing.

The terms of reference of the Working Group were to examine a number of issues related to the three major financially tested programs for which Consolidated Municipal Services Managers (CMSMs) were assuming delivery responsibility. During the preparation of the report, consultation sessions were held with CMSM staff throughout the province.

The Working Group reported to the CMSM/Provincial Advisory Committee for Social and Community Health Services. This Committee consists of the CAOs of five CMSMs, AMO's Director of Policy and Government Relations and Assistant Deputy Ministers from MCSS, MMAH and MOHLTC.

The Advisory Committee has reviewed the Working Group's report which is now being distributed to the CAOs of all 47 CMSMs. The report is also being distributed in limited quantities to the Heads of Social Services in all CMSMs and is being made available on the AMO website.

The report is intended to be a practical guide to all CMSMs as they continue to work with stakeholders in their communities to develop their service systems. There is also a subset of recommendations for the consideration of the province. These recommendations will be analyzed and reviewed by a team of staff from MMAH and MCSS under the direction of a joint ADM committee.

On behalf of the Advisory Committee, we are pleased to provide you with three copies of the final report.

Sincerely,

Celia Denov
Assistant Deputy Minister (A)

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Social & Community Health Services
Implementation Project
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March 2000

Dear Heads of Social Services;

Re: Final Report of the Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing

In early 1999, the province, in conjunction with the Association of Municipalities of Ontario and the Ontario Municipal Social Services Association, created a staff Working Group to prepare an advisory report.

Its terms of reference were to examine a number of issues related to three major financially tested programs for which Consolidated Municipal Services Managers were assuming delivery responsibility- Ontario Works, Child Care and Social Housing.

The Working Group reported to the CMSM Advisory Committee for Social and Community Health Services. The Advisory Committee consists of the CAOs of a number of CMSMs, the Director of Policy and Government Relations of AMO and provincial Assistant Deputy Ministers from MCSS, MMAH and MOHLTC.

The Advisory Committee has reviewed the Working Group's report and is now distributing it to the CAOs of all 47 CMSMs. The report is intended to be a practical guide to all CMSMs as they continue to work with stakeholders in their communities to develop their service systems. Consultation sessions were held with CMSM staff throughout the province in the preparation of the final report.

As co-chairs of the Working Group, we are pleased to provide you with three copies of the report and its companion report. A limited number of additional hard copies are available by contacting the Social and Community Health Services Implementation Project at 416-325-5320. The report is also being made available on the AMO website.

Sincerely,

Bob Cooke
Co-chair
Ministry of Community and Social Services

Carl Ross
Co-chair
County of Dufferin

encl.

February, 2000

CMSM Advisory Committee -
Social and Community Health Services

We are pleased to submit to you the Report of the Joint Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Social Housing and Child Care.

In addition, we are pleased to forward a copy of the Companion Report, a detailed description of the rules and business processes for the three programs specified in our terms of reference.

These reports have been prepared primarily as a practical guide to all Consolidated Municipal Services Managers (CMSMs) as they continue to develop their service systems. We have consulted with CMSM staff throughout the province in preparing this report, to be sure it will be of use to them as well as the many stakeholders interested in these three programs.

It is our hope that you will agree to the distribution of these reports to all CMSMs on this basis. Thank you for your advice and guidance throughout our work.

Sincerely, the members of the Working Group:

Deb Ballak
David Clarke
Bob Cooke
Mark Fisher
Carrol Garvey
Zahir Ismail
Helen Kandiuk
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THE REPORT OF THE MUNICIPAL/PROVINCIAL WORKING GROUP ON FINANCIAL TESTING AND ACCESS TO ONTARIO WORKS, CHILD CARE AND SOCIAL HOUSING

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EXECUTIVE PREAMBLE

This report and its Companion Report are intended to be of immediate use to at least four types of organizations:

- the 47 designated CMSMs (Consolidated Municipal Service Managers) who have new responsibilities for the delivery of Ontario Works (OW), Child Care and Social Housing
- providers of social housing
- providers of child care
- provincial ministries

Due to Local Services Realignment (LSR), all four types of organizations are being asked to relate to each other in new ways, shaped by a new set of program responsibilities conferred on CMSMs by the province. As service system managers, the 47 CMSMs are now examining this new set of programs to see what features of a service system already exist or can be created to improve customer service and increase efficiency in delivery.

The task of developing a true service system is not easy, since each stakeholder in the system needs to accept their particular role in order to fulfil it appropriately. Ideally, each stakeholder should be part of the ongoing development of the system.

In order to participate in service system development, a basic understanding of the component programs is indispensable. This is the role of the Companion Report; it is the first-ever detailed comparison of the basic rules and business processes for the three programs, all in one document.

Another reason service system development is not easy is that there is no single correct type of service system. Each community needs to develop the system that is most responsive to local needs and characteristics. To do that, flexibility is needed whenever possible.

Given this situation, the main report makes only a modest number of recommendations which could be characterized as prescriptive in nature. Instead, many recommendations concentrate on the type of activity which should be taking place locally to develop local solutions.

As a result, it is expected this report will be used as a reference document for all organizations involved in the ongoing development of a service system for social and community health services.

EXECUTIVE SUMMARY

Why Create a Working Group on Financial Testing? And why the Focus on Ontario Works, Child Care and Social Housing?

It has long been noted that these three programs each rely on financial tests of users to determine the amount of subsidy to individuals. There are certainly similar features in the financial testing function across these programs, e.g., asking people about their income and assets, their family status, verifying information with independent sources. Moreover, programs have a subset of clients in common, given they are intended to help low-income people.

However, there has historically been a high degree of administrative separation between and among the organizations responsible for carrying out this type of work. This has proven to be a barrier to improving services for clients and achieving efficiencies.

Conducting a search for ways of improving services now appears to have been simplified by Local Services Realignment (LSR):

- Before LSR, responsibility for financial testing of Ontario Works, Child Care and Social Housing applicants was:
  - divided between two levels of government
  - scattered among some 200 municipalities and boards
- After LSR, these same responsibilities will be:
  - concentrated in one level of government
  - consolidated to only 47 designated municipalities and boards

That is not to say that making improvements is an easy task, since each program is complex, not to mention the variations in business practices in each community. For this reason, a small Working Group of municipal and provincial program staff was convened to begin to scope out the possibilities for improving customer service and increasing efficiency.

How Was the Work Done?

Although the staff of the Working Group were knowledgeable about their own program areas, each realized they had a lot to learn about the other two programs. Accordingly, the group devoted their first several meetings to 'self briefing'.

This resulted in one of the early conclusions of the group – if the three programs were to be delivered more efficiently, they could not exist as three separate 'silos'. Simply put, most people had to learn more about the full set of program characteristics and business practices if they were to participate in local activities intended to develop service systems.

Consequently, the group set about its first concrete task - compiling a detailed description of all the major program rules and the business processes which have been developed to apply these rules. Hence the Companion Report "A Description of Business Processes", which should be viewed as essential pre-reading to the main report. The second phase of the group's work was devoted to having outside experts provide in-depth presentations (e.g. on how a particular function is being carried out in their jurisdiction, on freedom of information, etc.). A full list of these presenters appears in Appendix V.

Third, the group developed a vision statement and set of delivery principles as benchmarks to assess the current system and to debate the merits of proposed changes. The vision statement and principles appear on page 32 of the report. Armed with a degree of knowledge, the group moved on to its fourth phase of work – developing specific recommendations. In that regard, the Companion Report proved its worth. It highlighted instances where a particular function in one program simply did not exist in another, or where the functions were handled quite differently. In some instances, the differences were easily explained; in others, there did not seem to be a clear reason for a difference. This resulted in some of the specific recommendations to be found in Part C.

The fifth stage of work consisted of looking at the overall service delivery system questions facing each CMSM. At the broadest levels, questions emerged such as: Which organization(s) should conduct financial testing in the future? What criteria should be used to make this decision? What sort of front door system of access and referral could be used to serve applicants of the three programs? The questions are contained in Part B of the report; Part D shows the input received during the consultations.

Finally, the group put its tentative findings and recommendations, including the Companion Report, out for consultation. A series of province-wide meetings were held with management staff of CMSMs whose responsibilities pertained to one or more of the three programs. All 47 CMSMs were invited to participate in this process. Meetings were also held with provincial Associations. A separate but parallel set of province-wide meetings was held with social housing providers.

What Were the Findings from the Consultation Process?

The CMSMs felt the main report and Companion Report would be useful resources for them in moving to integrated service delivery. They agreed with most of the Working Group's recommendations and proposed an additional recommendation supporting the development of a seamless province-wide technology for all three programs. The CMSMs indicated a high degree of sensitivity to the concern that new service delivery models could stigmatize clients of the Housing and Child Care programs, depending on how these programs were delivered relative to Ontario Works. Other issues raised by the CMSMs related to transition challenges and the need to gain the support and understanding of elected municipal officials. The importance of maintaining a strong client focus was a consistent theme across all ten consultation sessions.

The providers who participated in the four Social Housing focus groups expressed concerns over a perceived loss of autonomy, stigmatization, reductions in service quality and negative impacts on some client groups. They questioned the efficiencies that could be achieved with integrated services and supported a delivery model that left the financial testing function with the providers. The focus group participants offered a number of concrete suggestions to help the CMSMs address the provider view during implementation planning and decision making.

What Are Some of the Specific Recommendations?

The report makes 17 broad recommendations, and additional sub-recommendations that focus on the short, medium and long term.
Pages 56-76 comprise a full listing of all recommendations. Some of the highlights of the recommendations are paraphrased below:

- Each CMSM should develop a vision statement and delivery principles
- A team of staff from all program areas should review program rules for compatibility
- A unique client identifier should be used across all three programs
- A Working Group of staff should examine the feasibility of one seamless information system with functionality across all three programs on one screen and one keyboard

- Financial information about individuals can, with consent, be disclosed across all three programs, using data matching protocols to protect privacy
- Verification procedures used across all three programs should be systematically reviewed by a group created for this purpose

What Does the Report Say About Service Delivery?

Part B of the report identifies the various factors and issues each CMSM must consider as it develops service delivery models. This part of the report includes the following sections:

- fundamental differences in program characteristics;
- potential models for the financial testing function;
- potential models for intake and waiting list management;
- overall service delivery models.

FUNDAMENTAL DIFFERENCES

The fundamental differences in program characteristics are as follows:

- Ontario Works financial assistance is a service which is quite homogenous (usually money and drug card) with no overall restrictions on numbers subsidized. Speed of service is very important.
- Rent Geared to Income (RGI) Housing is a rationed commodity with demand in excess of supply, long waiting lists and in which no two housing projects are exactly the same. As a result, waiting list management, prioritizing applicants in a fair manner, and matching applicants to an appropriately sized unit are complex tasks that do not have a parallel in Ontario Works financial assistance;
- Child care fee subsidies have strong parallels with RGI housing in terms of it being a rationed commodity, often with long waiting lists which are similarly difficult to manage.

FINANCIAL TESTING FUNCTION

This section of the report examines the multiplicity of options available, primarily for social housing (since financial testing is largely already done by CMSMs in the other two programs). It is assumed that each CMSM will have to decide for itself how this function will be performed. There are many design variables included for consideration. Each could be a major factor in CMSM decisions as to which, if any, portion of the function should be done by CMSM staff or social housing providers. For example, the function could be divided according to client group, type of provider, size of provider, testing of new tenants/members vs ongoing testing, etc. Other factors would also need to be considered, e.g., geography, location of municipal offices, desired size of government staff, customer service.

For financial testing in RGI housing, there are literally thousands of combinations. However, for consultation purposes, six scenarios were put forward:

1. leave the function with providers
2. leave with providers all work except that which requires CMSM staff such as eligibility review officers
3. leave the function with large providers but take it over from small ones
4. leave the function with providers serving primarily seniors but take it over elsewhere
5. CMSMs do initial financial test of new clients; providers do update for ongoing case management
6. take over the function from all providers

In Child Care, the range of options for financial testing is somewhat more limited, centering on how CMSMs choose to organize their departments. This resulted in four consultation scenarios:

1. keep Child Care financial testing separate from OW
2. same as 1, only use OW staff for specified work (e.g. suspected fraud, family support issues)

3. merge the function with OW (RGI financial testing still done by providers)
4. merge with OW into a generic 'Financial Eligibility Unit' which also does testing for RGI housing.

INTAKE AND WAITING LIST MANAGEMENT

The section on models for intake and waiting list management assumes that each CMSM will be required to maintain a unified access point to get on the waiting list for RGI housing. A range of options was put forward for consultation, with respect to RGI housing, such as:

- keep the same organization in charge of access and waiting list management, but moving it into the same building with staff delivering OW and Child Care;
- keep the same organization in charge but sharing the same space with municipal staff and sharing many aspects of administration (phone reception, waiting area, interview rooms, staff lounge, word processing, internal mail, etc.);
- have intake and waiting list management done directly by the CMSM.

OVERALL SERVICE DELIVERY MODELS

The major conclusion is that there is no one service delivery model that is clearly appropriate for a particular type of CMSM. Each CMSM will have to work this through in its own local context.

This section also points out the need for all local stakeholders to be involved in constructing overall service delivery models incorporating all the major functions and business processes. In particular, local client pathways need to be developed to see the impact on users of the service.

What are Some Next Steps?

This report and the Companion Report have been written for a variety of stakeholders for a variety of purposes:

- to bring all stakeholders to more of a 'level playing field' in terms of their knowledge about the three programs, their similarities and differences and how they operate;
- to offer working statements of vision and principles for all local stakeholders to further refine together;
- to raise specific short-term recommendations for organizations to serve people better and improve their efficiency;
- to outline service delivery models for local consultation.

As a result, the report can be viewed as a catalyst for bringing local stakeholders together to take the planning and implementation of a service system to its next phase. The report also identifies some longer term recommendations for the province and CMSMs to consider together, such as a common client identifier or making better use of technology. It is expected that the province and CMSMs will, in a variety of forums, be undertaking such activities.

PART A – CONTEXT

This part of the report provides an overall context, describes the three programs that are the focus, the stakeholders, the approach taken to the work, the key program characteristics relevant to the analysis, and discusses the nature of the financial testing function.

I. INTRODUCTION

In our society, information about personal finances is considered to be just that - personal. It is with reluctance that most people reveal their income, the source of their income, the amount they have in the bank, etc., to others. When the information is being provided to government or one of its agencies for purposes of determining eligibility for a service, the degree of stress is magnified.

Yet government subsidies based on a person's financial capacity are a fixed fact of life. Moreover, many people find themselves having to declare essentially the same information repeatedly, fill out similar forms, provide constant updates, etc. The phenomenon of repeating the same information over and over to different government officials is exacerbated whenever a person applies for more than one program which makes similar demands for personal financial information.

In Ontario, there are three major financially tested programs in which the potential for this type of duplication is greatest, namely Child Care, rent geared to income housing and Ontario Works financial assistance. This potential exists in large measure due to the overlap in populations served. For example, at any point in time, about one quarter of all RGI units for non-seniors are occupied by people participating in Ontario Works. An even greater proportion would have received OW over the past year or two given turnover in the caseload.

Not only do the populations served overlap, as the following section on Local Services Realignment indicates, there is a growing potential for the same local government official to be the recipient of financial information for all three of the above programs. This appears to open up desirable opportunities for improved customer service and efficiencies in terms of how these programs are accessed and operated. It may also mean undesirable opportunities for information to move from one program area to another in contravention of the most basic principles of privacy legislation.

A small Working Group of provincial and municipal program staff was convened to scope out possibilities for improving customer service and increasing efficiency. The mandate of the Working Group is described in detail in its Terms of Reference, contained in Appendix III to this report. It should be emphasized that the mandate focuses on the *administration* of financial tests, not the *design* of the tests themselves.

This report, produced by the Working Group, identifies positive opportunities and how they can be achieved, giving due regard to the need for safeguards respecting the use of personal information. It has been written with an expert audience in mind; officials of local government, providers of social housing and Child Care.

Accordingly, the primary purpose of this report is to be a service planning resource to Consolidated Municipal Service Managers as they take on new roles for the three programs as a set.

The service delivery models (Part B) identified in the report are potentially useful to CMSMs over the next year or two, as they work with program providers and users to determine which model works best in their community.

The draft recommendations (Part C) are wide ranging and are intended primarily to be useful advice from program staff to decision makers in both municipal and provincial governments.

Part D, entitled Consultation Input consists mainly of the report of an independent consultant who facilitated a series of meetings across the province to seek input on the draft report as a CMSM planning resource.

II. THE NEW CONTEXT: LOCAL SERVICES REALIGNMENT

The changes in provincial and municipal responsibilities announced by the provincial government on January 14, 1997, outlined new directions for the delivery of social assistance, Child Care and social housing. These changes have created the opportunity to implement a more integrated and effective system of social and community health services under municipal leadership.

For purposes of this report, consolidation of municipal service management means managing the delivery of social assistance (Ontario Works), and Child Care, and the administration of social housing programs, by 37 designated municipalities and 10 District Social Services Administration Boards, referred to as DSSABs. These 47 entities are called Consolidated Municipal Service Managers and are referred to as CMSMs. (A map showing the geographical boundaries of the CMSMs can be found in Appendix IV.)

The reforms are built on a number of common themes that reflect the goals of both the government of Ontario and municipalities, in every part of the province. Key among them are:

- streamlined service delivery;
- greater accountability to taxpayers;
- protecting priority services and maintaining critical standards;
- rationalized funding responsibilities;
- capitalizing on local expertise and innovation; and
- greater autonomy for local government.

These reforms represent opportunities for CMSMs to deliver high quality services to people in an efficient and integrated system which is tailored to the needs of the communities they serve. The local service systems will include a network of services delivered by any number of organizations, government offices, municipalities and community based agencies. The key to these services is that they are coordinated, complementary, and accessible.

As "service system managers", CMSMs are being challenged to look at short term as well as long term community goals, how best to shape the service system to achieve these goals, and ways to invest resources in prevention and early intervention.

CMSMs will be managing a comprehensive range of human services at the local level (including Ontario Works, Child Care, and Social Housing) in a way which reflects each community's needs. Although outside the scope of this report, it should be noted that LSR also increased the municipal role in public health and land ambulance as well as in the Ontario Disability Support Program.

The following is a brief set of LSR highlights for the three programs. For a fuller description of the programs, please see Part A, Section VI: Key Program Characteristics.

Ontario Works

With the passage of Bill 142, the *Social Assistance Reform Act* (SARA) in November 1997, the government created the *Ontario Works Act* and the *Ontario Disability Support Program Act*. Bill 142 is the first major reform of social assistance legislation in 30 years.

The Social Assistance Reform Act replaces:

- The *General Welfare Assistance Act,*
- The *Family Benefits Act, and*
- The *Vocational Rehabilitation Services Act.*

The *Ontario Works Act* was proclaimed May 1, 1998. The Ontario Works program ensures that financial and employment assistance are available for people in need, while encouraging self-sufficiency. As a condition of eligibility for Ontario Works, people are expected to take part in programs designed to help them obtain a paid job. Ontario Works ensures that financial assistance is available for those in need and provides employment assistance so that people receive the experience, contacts and the skills they need to become self-sufficient. Municipalities are responsible for managing the delivery of Ontario Works.

Child Care

The role of Child Care services is an important support to employment, a component of integrated services for children, and a vital support to families. Schedule C of the *Services Improvement Act* (SIA), which came into effect January 1, 1998, amends the *Day Nurseries Act* (DNA). These amendments relate to a shift in provincial and municipal roles and responsibilities, including cost sharing. Existing standards for licensed child care specified in the DNA before January 1, 1998 are being maintained.

Previous to January 1, 1998

- municipal involvement was discretionary; in 1997 ninety-four municipalities cost-shared fee subsidies with the province
- where municipalities chose not to participate the ministry entered into agreements with "approved corporations"; in 1997 ninety-two approved corporations delivered fee subsidies
- MCSS entered into agreements directly with service providers to deliver all other Child Care services i.e. Resource Centres, Special Needs Resourcing, Wage Subsidy

After January 1, 1998

- municipal cost sharing is now required for all prescribed Child Care services.
- the amendments provide authority for the Minister to designate delivery agents (municipalities or prescribed boards) for a geographic area
- the delivery agents operate within a framework of comprehensive provincial standards.

Social Housing

A three stage process is planned for the devolution of social housing to municipalities:

- transferring financial responsibility as of January 1, 1998;
- reforming social housing programs to simplify administration, and examining the potential to integrate some aspects of the program with other CMSM programs;
- devolving administrative responsibility to CMSMs following program reform, and developing local capacity.

The *Social Housing Funding Act* deals only with the first of the three stages. It is assumed that future legislation would, if passed, give each CMSM the flexibility to make major service delivery decisions, including who should perform the financial testing function, and who should operate the co-ordinated access systems.

The Act permits the province to recover from the municipal sector, the province's costs of administering and funding social housing programs, including programs for non-profit housing corporations, non-profit housing co-operatives, and the Ontario Housing Corporation (OHC). For 1998 and 1999, only administrative costs for OHC and LHAs were recovered. Costs for Regional Offices and MMAH head office were not included in billings to CMSMs. After January 1, 2000, all administrative costs are billed.

Under the legislation, municipalities are responsible for paying the costs of social housing.

The program which CMSMs will be administering is still largely undefined.
It is assumed that new legislation would, if passed, provide clarity as to the legal relationships between and among CMSMs, providers, and tenants/members.

Federal and Provincial Roles In Social Housing

Social Housing is funded and administered by both the federal and provincial governments under several different agreements, ranging from funding solely by one or the other governments, to joint funding arrangements.

The total cost of housing assistance in Ontario is about $1.45 billion, which is cost-shared with the federal government:

- in 1996/7, OHC cost $433 million, of which the federal government contributed $243 million.
- in 1996/7, non-profit housing cost approximately $1 Billion of which the federal government contributed $321 million.

In November 1999, Ontario and the federal government entered into a new federal/ provincial agreement which:

- transfers administration of federally administered programs (except federally administered co-ops) to the province;
- establishes what level of continued financial support will be provided by the federal government; and
- provides the flexibility to devolve administration of both federal unilateral and joint federal/provincial programs to municipalities.

Realignment of Provincial Field Offices

The introduction of new legislation, the transfer of some responsibilities to municipalities, the evolving nature of program delivery and the need for increased inter-ministerial collaboration, have led the Ministries of Health and Long-Term Care and Community and Social Services to realign their field offices.

MCSS has consolidated its twelve Area Offices into nine Regional Offices. As part of this exercise, MCSS will be sharing common geographic boundaries with the Ministry of Health and Long-Term Care as it moves to a regional structure. This will enable the two ministries to identify opportunities to co-locate and share administrative and support services, as well as facilitate effective communication with CMSMs.

Northern Ontario

In 1998, the province proclaimed the *District Social Services Administration Boards Act*. It provides for the creation, financing and governance of boards responsible for social services including the three programs. At present, there are 10 DSSABs in existence. Their jurisdiction covers all of Northern Ontario with the exception of the Sudbury Regional Municipality.

On April 1, 1999 the *Northern Services Improvement Act* (NSIA) was proclaimed. It provides for a different type of consolidated service delivery in Northern Ontario as an alternative to DSSABs. Under the new NSIA, communities can agree, on a voluntary basis, to request a Minister's Order to establish an Area Services Board (ASB).

In addition to the core social services administered by DSSABs, an ASB could oversee a number of optional services such as economic development, airports, roads, land use planning, etc., as well as levy taxes directly.

As of the time of this report, no formal requests to establish an ASB have been received by the province.

Stages of LSR Implementation

A comprehensive description of the roles and responsibilities for both the province and municipalities, following the transfer can be found in a document entitled "Roles and Responsibilities: Provincial-Municipal Services Realignment; Social and Community Health Services" published in January 1998. This document may be obtained by contacting the Provincial-Municipal Realignment, Social and Community Health Services Implementation Project at (416) 325-5320.

LSR has required changes on a number of fronts, each with its own implementation timelines. For example:

- the 47 CMSMs were designated in law for Ontario Works purposes in May 1998.
- transfer of sole support parent (FBA) files to CMSMs took place based on the degree of local administrative readiness, during 1999.
- Child Care responsibilities were assumed by CMSMs throughout 1999 with final designations as of January 1, 2000.
- the federal/provincial agreement concerning administrative devolution among other things, was signed in November 1999.

With these shifts in responsibilities come opportunities to "build the internal systems and redesign business processes to simplify client access, become more efficient and strengthen program integrity"[1].

With LSR well underway, CMSMs are now in a position to provide increased attention to the issues related to social housing in their jurisdictions. In many CMSMs, social housing has operated quite independently from other municipal programs.

Municipal Non-Profits (MNPs) have different types of relationships with their municipalities, ranging from scenarios where municipal staff perform management duties on a fee for services for the MNP, to situations where there is a minimal relationship with the municipality. This means many new relationships have to be built, staff have to learn more about programs, business processes have to be created, etc. As a consequence, social housing is among the last of the major programs affected by LSR, to undergo implementation of new delivery processes.

III. PROGRAM OBJECTIVES

Local Services Realignment clearly provides opportunities to explore ways in which people can be served better and at lower cost. However, these savings are often realized only after significant restructuring and overhauling of basic business processes across a number of program areas.

In a climate of such sweeping change, there is a danger that the fundamental objectives underlying each program are inadvertently affected. When this happens, it is people who suffer; either as users of the service, who find they are worse off than before the change or as taxpayers who find they are paying more. Therefore, the Working Group felt it wise to articulate the objectives of the three programs included in its Terms of Reference. However, a word of caution is called for. When it comes to capturing the objectives of social programs, there is a natural tendency to use words which leave some room for interpretation.

Furthermore, the overall sense of a given program's objectives can and does change over time, if only because the social climate in which the program exists is constantly evolving. Nevertheless, without some sort of touch-stone concept of the distinct objectives of each program, there is an increased risk that changes in approach to delivery will have unintended impacts on program objectives.

It is in this spirit that the Working Group agreed on the following statements as sufficient to give a general sense of the objectives of each program:

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[1] Suzanne Herbert, Deputy Minister of Community and Social Services, in her speech to the Ontario Municipal Social Services Association, November 1998

Ontario Works Program Objectives

a. To recognize individual responsibility and promote self-reliance through employment
b. To provide temporary financial assistance to those most in need while they satisfy obligations to become and stay employed
c. To effectively serve people needing assistance, and
d. To be accountable to the taxpayers of Ontario (*Ontario Works Act*, 1997)

Child Care Program Objectives

Support social and economic development in Ontario by investing in and supporting an affordable, accessible and accountable child care system benefiting children, their parents and caregivers, and the broader community.

An alternate or additional approach for Child Care is to describe the objectives of the fee subsidy component. This would be along the following lines:
"The objective of child care fee subsidies is to encourage economic independence by helping people leave and stay off social assistance and providing a support to employment for parents through fee subsidies to enable eligible low-income parents to work, train, or undertake education leading to employment."

MMAH Social Housing Objectives

The social housing program helps to meet the housing needs of Ontario residents, particularly low and moderate income families, senior citizens, single non-seniors and people who need support services to live independently. Through government owned public housing, community-based social housing and rent supplement units in privately owned buildings, the social housing program provides affordable housing for people with low and moderate incomes. Funding for many social housing projects is shared with the federal government.

Program objectives have pre-eminence as drivers of program design and are therefore key determinants of who will actually be able to access the program. There is significant overlap in who gets served by each, primarily within the group of people of labour-force age:

- about 24% of people in non-seniors RGI housing are participating in Ontario Works (combined with the Ontario Disability Support Program, about 45% of people in non–seniors subsidized housing are on social assistance)
- about 40% of people receiving regular Child Care fee subsidies are participating in Ontario Works (based on statistics for Toronto and Ottawa-Carleton)
- about 13% of people participating in Ontario Works are in RGI housing

For additional statistics see Part A, Section VI: Key Program Characteristics.

Over time, given movement in and out of the programs, there would actually be a higher percentage of people who access more than one of the three programs.

The above statistics are designed to capture a key distinction which is reflected in the objective statements, namely that Ontario Works and Child Care serve primarily non-elderly people, while RGI housing serves people of all ages. About 33% of all subsidized units in Ontario are for people over age 60. In a similar vein, Child Care, by definition, serves families with children, while the other two programs serve all family combinations including single people.

One other fact that is perhaps intuitively obvious to people who work in the human services field, but bears mention, is that Ontario Works (unlike Child Care or RGI housing) is an open-ended program. That is, everyone who meets the eligibility criteria receives financial assistance. The other two programs, like the vast majority of government programs, operate with limited funds which must be rationed through one mechanism or another.

For a more detailed description of the characteristics of the three programs, please refer to Part A, Section VI: Key Program Characteristics.

IV. STAKEHOLDERS

Given the nature of the program objectives, the major client groups served, and the sheer size of the programs, it is no surprise that there are many stakeholders with a clear interest in the functions of financial testing and access to service.

The purpose of this section is to highlight the stakeholder groups and provide a brief indication of their major interests as they pertain to financial testing and access. It is not intended to be a full representation of all stakeholder positions on all issues.

The stakeholders included in this section are:
1. Users of the services
2. Providers of the services
3. CMSMs
4. Provincial government
5. Federal government

1. Users of the Services

Although program objectives vary across the three programs, there are similarities in the major interests of people who wish to access them. Many of these interests are reflected in Part B, Section II: Design and Delivery Principles. Some of their interests are to:

- be treated with respect
- have fair rules which are explained clearly and applied consistently
- have one place to call and one staff person who can deal with a variety of situations
- be able to find out easily where their application is in the process
- receive service quickly and in a way that is adapted to the individual
- be told about other programs that may be of help

At the same time, the interests of users are not always in consonance. For example, some users of services are gainfully employed, while others are not. The first group tends to receive lower financial subsidies than others. In some cases, people who receive these subsidies do not wish to be grouped in any way with those who are unemployed and may be dependent on social assistance for support.

However, when services are designed and delivered in a way that separates people this can create and reinforce stigma. This represents a challenge that CMSM staff and service providers are aware of, namely, how to deliver programs in a way that is inclusive and treats everyone according to the delivery principles expressed in this report.

As all RGI tenants/members will likely have established an ongoing relationship with their housing provider, and consider that they enjoy one-stop shopping currently, many will object to any change in service delivery.

2. Providers of the Services

For the purposes of this section of the report, 'providers' includes only RGI housing providers and operators of child care centres receiving fee subsidies from government. Although CMSMs are in fact providers of Ontario Works, they are included in a separate stakeholder category.

Providers of licensed Child Care services in Ontario consist of approximately 3,400 private and non-profit centres and 145 private and non-profit home Child Care agencies. Municipalities purchase licensed care for subsidized children from many of these programs and, in some cases, directly operate Child Care programs.

In 1998/99, fee subsidies were managed and delivered by 94 municipalities and 92 approved corporations (as well as 52 First Nations who are not affected by Local Services Realignment).

As of January 1, 2000, 47 CMSMs are managing the delivery of Child Care fee subsidies. As a result of consolidation, some of the child care providers with subsidized spaces have entered into a purchase of service agreement with a different municipality, while others will continue a relationship with the same municipality. Approved corporations no longer receive fee subsidy funding directly from MCSS, nor are they required to provide 20% of the cost through parent fees, fundraising and other means. Municipalities began cost sharing these fee subsidies once the CMSMs in their catchment areas were designated. CMSMs may enter into purchase of service agreements with child care providers that were approved corporations.

Compared to providers of child care, providers of social housing are significantly impacted by the LSR changes. Social housing providers have related primarily to the federal and provincial levels of government for funding and program administration. Now, both of these levels of government are in the process of fundamental role changes.

Housing providers share many common interests, notably providing adequate quality accommodation to low and modest income households, serving the particular needs of their residents, running their projects in a cost-efficient manner, and maintaining the long term viability of their operations.

It is important to note that housing providers are led by volunteer boards of directors who (except in the case of LHAs) have responded to local community needs for affordable housing. As board members they have accepted legal liability and responsibility for the corporations on which they serve. CMSMs will be dealing with the corporations as well as the staff who manage the housing. The interests of the boards and their staff may not always be the same.

Providers have different organizational demands and histories which will be reflected in their views about the realignment of services at the local level. The term social housing actually refers to four types of housing providers, each with somewhat differing perspectives on the challenges posed by the new service structure.

First, Local Housing Authorities (LHAs) are the management agent of OHC and are governed by boards comprised of community and municipal representatives. Many municipal representatives sit on the LHA to gain insight into the LHA, however LHAs do not have to account to the municipality for their decisions or spending. In fact, confidentiality about LHA matters specifically binds LHA members, hence limiting any reporting back or information sharing opportunities. It should be noted that OW, Child Care and Municipal Non-Profits have close working relationships with LHAs.

The boundaries for the current 54 LHAs are being revised to correspond with the 47 CMSMs and board representation increasingly reflects that of the CMSM. LHA staff have generally enjoyed good relationships with CMSM Ontario Works staff and will welcome ways in which information can be shared more efficiently. Many LHAs act as the focal point, currently, for coordinated access centres.

Second, Municipal Non-Profit housing providers (MNPs) are independent agencies of municipalities. In some cases, the MNP is associated with the level of government that has been designated as the CMSM. Where the MNP is associated with a municipality that is not a CMSM, the structure could change, depending upon the views of the CMSM. Even more so than LHAs, MNPs are structurally aligned with municipal interests and will see the relationship intensify as CMSMs develop their role as the service system manager.

Private non-profit housing providers (PNPs) and non-profit co-operatives (i.e. the third and fourth types of providers) are somewhat more removed from municipal spheres of influence than LHAs and MNPs. Private non-profit providers, comprised of service clubs (e.g. Rotary, Kiwanis), ethnic organizations, faith communities and social service agencies, were often formed to meet the housing requirements of specific groups. Co-operatives are groups of persons working together in a democratic environment to control their immediate surroundings and build local communities. Both of these groups will wish to ensure that their ability to meet the needs of their residents/ members is protected in any re-structuring of services.

Depending upon the decision of the CMSM, housing providers may no longer be doing the intake functions they currently perform – determining eligibility, verifying income, etc. It is assumed CMSMs will have the opportunity to decide whether to integrate some or all of these functions into their delivery system for Ontario Works financial assistance and Child Care fee subsidies.

Although the LSR changes do impact on child care providers, many providers have already developed a working relationship with CMSMs over the years. However, as CMSMs review their new responsibilities and look for new ways of conducting business, child care operators are concerned that they be part of the process. in particular, approved corporations will be impacted, since they administer the financial test themselves, unlike other types of child care operators.

In all three programs, providers must balance between two apparently contrasting roles, that of helping the client, and that of a financial tester "policing" incomes, information verification, etc. This presents a longstanding issue - should the two functions sometimes be delivered by two different bodies or should one worker have responsibility for delivering both?

Currently many OW offices are integrating the roles of financial assistance with employment workers in one "case management function". Their experience will be reflected in the model(s) they consider. Social Housing providers view the financial testing and property management functions as interdependent and inseparable. In their view, involving a third party will lead to inefficiencies due to financial loss when eligibility decisions are delayed.

3. CMSMs

While this report deals with eligibility review and income testing, it must acknowledge other impacts for CMSMs resulting from devolution. Housing is a long-term commitment. Its mortgages run for 35 years whereas municipalities issue debentures for 10 years. There are significant new responsibilities for professional asset management, and the properties in which social housing tenants/members live must be maintained at good standards to reduce the financial and social risks for CMSMs.

Within this context, CMSMs view the transfer of social housing as a significant event. It is an important part of the changing role of local governments as they assume management responsibility for a broader service system.

CMSMs have identified some of the key opportunities in their new role as service system managers:

- to provide local solutions to the provision of services in their communities
- to work in partnerships to:
  - promote seamless services
  - break down barriers and promote integration opportunities, and

  - enhance program integrity through the provision of consistency in business processes and rules where feasible.
- to be seen as having a role in providing a comprehensive range of human services, "not just welfare".

CMSMs realize they have much to learn about their new relationships and responsibilities before they are in a position to assume a full role which is commensurate with their funding obligations. Weighing heavily against this desire to take the time to learn is a sense of obligation to answer today to local taxpayers that they are getting full value for their housing dollar.

Any description of the interests of CMSMs in terms of social housing would be remiss if it did not say that municipalities believe this program should not be funded through property taxes. The funding reality is quite different, since the province has transferred 100% of its cost to municipalities.

At present, many CMSMs feel they have very limited capacity to assess whether or not the programs they pay for are effectively run (e.g. only eligible people are subsidized and appropriate rents are being charged).

With respect to Child Care, some CMSMs will be examining the financial testing function in a new light. This is because, as CMSMs consider their options for financial testing in social housing, some will include options that involve changes to the business processes used for Child Care. In addition, some CMSMs are municipalities that directly operate their own Child Care programs.

Finally, CMSMs are going through a period of extensive change in terms of Ontario Works, such as new legislation, transfer of sole support parent cases, and new program objectives. Many CMSMs have the added dimension of consolidating the delivery of Ontario Works in their geographic area. More change is planned in the form of new business processes and a new technology system. As a result, CMSMs are only now in a position to begin to study what it means to have delivery responsibility for three major financially tested programs and are looking for ways to serve people better and achieve efficiencies.

4. Provincial Government

As mentioned in Section II The New Context: Local Services Realignment, there is a detailed description of the ongoing provincial interest in the report entitled "Roles and Responsibilities". The following extracts from that report provide a good summary of provincial stakeholder interests in setting the legislative framework and in funding:

Setting the Legislative Framework

- Determining Strategic Directions: establishing policy directions and setting expectations for service levels, standards, business practices, etc.
- Strategic Planning: determining provincial objectives, interests, and priorities regarding the program, within the broader government context.
- Setting Policy Direction: establishing policies for the program.
- Setting Provincial Expectations: developing policies, guidelines, directives, etc. which convey the province's expectations for service levels, standards, business practices, etc.

Funding

Determining cost-sharing arrangements where appropriate; asset ownership, including liability; and revenue generation, including taxation powers and authority to set/charge fees, etc.

Inherent in this statement is a framework which balances CMSM flexibility to efficiently deliver services which reflect community circumstances with the need for social services to be consistently and reasonably available across the province.

Federal Government

As Ottawa implements its withdrawal[2] from administration of social housing with the provinces, its major interests are to obtain legal commitments from provinces that federal dollars will continue to be used for housing purposes and benefit people with low incomes. Under the terms of the Canada Health and Social Transfer, the federal involvement in the funding and delivery of Child Care and social assistance in Ontario is relatively limited.

General Observations on Stakeholder Interests

It is clear from the forgoing that:

1. there is potential for significant change to take place in the areas of financial testing and access to service
2. there are many new relationships which need to be formed among the various stakeholders
3. stakeholders are likely to have in-depth knowledge and significant involvement in one or perhaps two program areas, but need to learn more about the others
4. there is great diversity of provider types, both for Child Care and social housing
5. the major service delivery decisions lie with the CMSMs
6. each CMSM is in a different time and place in its readiness to choose a delivery model
7. each CMSM will have to determine its own processes and timing in terms of working with stakeholders locally

These observations led the Working Group to conclude that Part B, Service Delivery Models would be most useful if it was designed as a resource for each CMSM to use when conducting its own local stakeholder consultations.

Only through local meetings can discussions take place which are truly reflective of each community's wishes.

The need for local meetings was reinforced by much of the discussions that took place during the Working Group's regional consultations as well as its discussions with provincial associations. It was clear from these meetings that there is a desire for all stakeholders to know more about the goals, objectives and mandates of each other. Specifically, stakeholders identified the importance of holding local sessions, typically at the CMSM level to discuss the following points:

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[2] The federal government will be maintaining a direct role in administrative oversight of co-operative housing units which have historically been fully funded by Ottawa.

- All service providers, including CMSMs are in the business of helping people.
- Negative stereotypes about different programs and those who use them need to be overcome.
- Financial testing is only one component of the broader program, but one which is critical to the overall provider/client relationship.

V. APPROACH TO THE WORK

The Terms of Reference for the Working Group call for recommendations which cut across three large and separate programs, each with its own distinctive features and issues and which have existed in relative isolation. One consequence of this situation is the practical reality that no one person can really lay claim to being an "expert" in all three programs.

This necessitated an important early phase for the Working Group -- one that was referred to as "self-briefing". Group members with specific program expertise briefed the rest of the members. These early sessions covered the typical program basics, e.g., objectives, description of service delivery approach, basic statistics, ongoing issues, etc.

The self-briefings laid the foundation for the second phase of activity, namely, briefings by experts invited to present to the Working Group on specific areas of interest. In all, there were ten such presentations (see Appendix V for a list of all presentations and presenters):

1. Privacy, Information Use and Disclosure
2. Integration of Aspects of Child Care and Ontario Works in Ottawa-Carleton
3. Integrated Service Model in Halton
4. Child Care Database Project
5. Consolidated Verification Project
6. Fraud Control Unit; Information Use and Disclosure
7. Peel Financial Assessment Unit
8. Toronto Coordinated Access System for Social Housing
9. Social Benefits Tribunal and Internal Review
10. Pursuing Available Resources

At the same time, the Working Group began to draft a vision statement and service delivery principles to guide its subsequent deliberations.

The third stage of the work consisted of compiling, in detail, the key business processes involved in delivering services in each of the three programs. This permitted a systematic comparison of each process in each program, to the other two, and posing such questions as:

- where the processes differ, why is this so?
- what are the implications of making them the same?
- where a process simply does not exist in a particular program, should it be created?
- should one set of staff perform the function across all three programs?
- where a major initiative is underway in one program, what implications might there be for the other two? There were more than forty business processes analyzed in this fashion, falling under four major headings:
  - intake, initial screening, and waiting list management
  - determining eligibility
  - monitoring eligibility
  - administrative procedures

This work led the group to a number of draft recommendations that pertain to particular functions, but not to the system as a whole. Consequently, the group then took a look at the situation from a broader perspective to see what system-wide changes might be desirable. This led to a number of draft macro recommendations. All recommendations appear in Part C.

The group then considered system-wide models of service delivery for CMSMs to consider in their planning activities, be they large or small, urban or rural, etc. These models are described in Part B.

The next stage of work concentrated on organizing consultation sessions with CMSMs and preparing presentation materials, bearing in mind that each participant would be familiar with one program area but would not likely have detailed knowledge of the other two programs. Meetings were then held with CMSM staff throughout the province to hear their views on the draft recommendations and the service delivery models. Sessions were also held with social housing providers and several meetings took place with interested province-wide associations.

The concluding set of meetings of the Working Group dealt with how best to reflect the input received and then finalizing the report for presentation to the Provincial/CMSM Advisory Group. The Advisory Group consists of the Chief Administrative Officers of a number of municipalities and provincial Assistant Deputy Ministers from several ministries.

VI. KEY PROGRAM CHARACTERISTICS

Introduction

The three programs covered in this report are complex and large. A description of program characteristics could be lengthy yet still only skim the surface. With that in mind, the purpose of this section is to provide only a general understanding of the program characteristics that are most relevant to the issues addressed elsewhere in this report. As most readers likely have detailed knowledge of only one program it is hoped they will find at least some parts of this section to be informative.

Those interested in greater detail are reminded that the Companion Report is likely to be of assistance.

Client Groups

ONTARIO WORKS

Ontario Works provides financial and employment assistance to those in need. It is the income security program of last resort for single men and women, sole support parents, two adult families and youth. While it is generally available to individuals or heads of families between the ages of 18 and 65, there are some exceptional circumstances where 16 and 17 year olds and individuals over age 65 are eligible.

As a condition of eligibility, individuals must take part in employment focussed activities designed to assist them in obtaining a job. For reasons such as temporary illness or a single parent with a preschool age child, an individual can have this mandatory requirement deferred for a specified period of time.

If the person believes they may qualify for the Ontario Disability Support Program (ODSP) and are actively pursuing ODSP eligibility, they may be eligible to receive Ontario Works in the interim. The majority of ODSP recipients were on OW before they qualified for ODSP.

It should be noted that recipients of OW and ODSP when living in RGI housing make payments based on an MCSS-MMAH approved rent scale. In these cases the client's need has been pre-established, resulting in reduced duplication of work.

CHILD CARE – FEE SUBSIDIES

Parents who are eligible for full or partial fee subsidy include:

- parents in economic need who work, are in training or in school
- parents with special needs children
- high risk families with children
- Ontario Works participants who receive financial assistance for child care expenses related to community participation,

employment support and employment placement

Child care fee subsidies are provided to parents in need to enable them to move off social assistance and/or become self-reliant, and to assist other low-income families to remain in paid employment.

Fee subsidy is paid directly to the licensed Child Care program and the parent is often required to contribute to the cost of child care. Depending on the results of the needs test, families may receive only a partial subsidy. Given municipal discretion, the income levels at which low-income families qualify for Child Care fee subsidy can vary from community to community.

Ontario Works participants and those receiving benefits under the Ontario Disability Support Program are eligible for a full Child Care fee subsidy without being needs tested for Child Care. Families not receiving social assistance but with incomes close to the threshold may be required to pay almost the full fee on a sliding scale.

For families with special needs (handicapped) children, eligibility is based on the fact that the child meets the criteria of "handicapped" and the needs test may not be required. In these cases, higher income families with special needs children may receive subsidy.

SOCIAL HOUSING

All permanent residents of Canada and refugee claimants who need a dwelling in Ontario and do not have a principle residence elsewhere may be eligible for subsidy, provided their income is below a threshold that is based on local housing cost. The applicant or at least one member of the household must be 16 years of age or older.

The profile of occupants of social housing is very broad, including families, seniors, single adults, and people with special needs. Occupants may be employed or dependent upon social assistance. Some tenants pay full market rent, while others receive a significant rent subsidy.

Social housing units may be matched with support services to accommodate the specialized needs of frail elderly, people with physical and/or developmental disabilities, consumers of mental health services, people who are hard to house and individuals or families leaving abusive situations.

Non-profit or co-op units can be sponsored by a variety of organizations such as service clubs, multicultural or faith groups.

Service Statistics

ONTARIO WORKS FINANCIAL ASSISTANCE

Ontario Works Caseload by Family Structure
for the Month of June 1999
(Positive Entitlement Only)

Single	112,000
Sole support parent	115,000
Couple (with children)	32,000
Couple (without children)	8,000
Total caseload	267,000
Total number of individuals receiving assistance	585,000
Number of cases reporting Earnings	49,000
Number of grants per month	23,000
Number of cases leaving per month	27,000
Total annual cost (allowances only)	$2.2Billion

CHILD CARE

- There are approximately 3,500 licensed Child Care programs of which one third are in schools.
- As of December 1998 child care centres province-wide had a licensed capacity of approximately 148,600 spaces. Of these, 80% were non-profit spaces and 20% are for-profit spaces.
- About 18,000 children are cared for in 8,500 approved homes affiliated with and monitored by over 140 licensed home child care agencies.
- Approximately 40% of parents with regular fee subsidies in the City of Toronto and Regional Municipality of Ottawa-Carleton are Ontario Works participants.
- Informal care is unlicensed and provided by a wide range of caregivers (neighbours, friends, relatives, etc.). Some funding under Ontario Works is provided to support parents using the informal sector.
- Approximately 180 Resource Centres provide support to parents and informal providers of child care.
- Demand often outstrips supply, for example 5 to 1 in the Regional Municipality of Ottawa-Carleton and the City of Toronto.
- In 1998/99, MCSS spent approximately $360 million for its 80% share of Child Care fee subsidies, including those targeted to Ontario Works participants. The remaining 20% was provided by municipalities, First Nations, approved corporations and parent fees.

SOCIAL HOUSING

The subsidized housing system has six components, totaling approximately 274,000 units:

1) 84,000 public housing units owned directly by the province
2) 57,000 municipal non-profit housing units
3) 74,000 non-profit housing units owned directly by private non-profit corporations
4) 41,000 non-profit co-operative housing units owned by co-op members
5) 13,000 units owned by the private sector, in which the tenant's rent is subsidized by the province's rent supplement program
6) 5,000 units developed under the Rural and Native and Urban Native programs

The total annual cost of housing assistance in Ontario is $1.45 billion. Of this total, approximately $1 billion is non-profit and $433 million is OHC housing (this figure also includes Metro Toronto Housing Company and the Rent Supplement Program).

In OHC, about half of the tenant households are families, about one-third are seniors and one-sixth are singles.

In non-profit housing the proportion of families is even higher – about two-thirds of the units. Seniors make up 20 per cent and singles less than 10 per cent.

Up to 10 per cent of units in social housing are occupied by tenants with special needs.

Thirty-five per cent of social housing units are occupied by high need clients who are defined as using over 50% of their income to meet average market rent.

Delivery Agents

ONTARIO WORKS

Ontario Works is delivered by a total of 47 Consolidated Municipal Service Managers (CMSM). Regulations define the geographic area for each CMSM. CMSMs are now delivering OW on behalf of other municipalities located within the defined geographic area.

CHILD CARE

Schedule C of the *Services Improvement Act* amended the *Day Nurseries Act* and allowed the implementation of Local Service

Realignment decisions. It makes municipal cost-sharing of prescribed Child Care services mandatory and allows for the designation of 47 CMSMs as delivery agents to manage the delivery of Child Care services.

As of January 1, 2000 CMSMs are responsible for the administration of financial testing for fee subsidy and for management of the Child Care service system. Delivery of Child Care services themselves can be achieved through a variety of models:

- In some cases a CMSM may deliver licensed formal Child Care services directly through a municipally operated child care centre or private home day care agency which approves and monitors individual providers in their homes.
- CMSMs may enter into a purchase of service agreement with licensed child care centres or private home day care agencies. These programs could be non-profit or for-profit and located throughout the community often in schools or sometimes in the workplace.
- Some funding under Ontario Works is provided to support parents using the informal sector (care provided by neighbours, relatives, etc.).

SOCIAL HOUSING

Broadly speaking, there are two major categories of providers:

- *Public Housing* (Ontario Housing Corporation, OHC) developed primarily between 1964 and 1979 with a 100% rent geared to income (RGI) tenant population. It is owned and managed by government agencies under the policy direction of the OHC board. There is a Memo of Understanding between the Ministry of Municipal Affairs and Housing and the board of OHC. OHC carries out management through 54 Local Housing Authorities (LHA). Financial testing is administered by LHA staff.
- *Non-profit housing* developed between 1973 and 1996 with most built after 1985. It is owned and operated by 1200 separately incorporated community-based organizations. It includes municipally-run non-profits, private non-profit and co-operative models of service delivery. These organizations each have an operating agreement directly with the MMAH. The population is a mix of RGI (70%) and market rent (30%) tenants. Financial testing is administered by the community-based organization responsible for the operation and management of the social housing units.

As part of Local Services Realignment, the responsibility for administration and funding of social housing is being transferred to CMSMs.

Nature of Financial Testing

ONTARIO WORKS

The financial test for Ontario Works is a **needs test** which compares assets and income to the financial needs of the individual/family. The deficit is the amount of financial assistance to be paid. In order to be eligible, the income of the applicant and any dependants must not exceed their budgetary requirements and their assets cannot exceed the limits as prescribed in the regulations. Needs and assets are defined in detail in provincial regulations, leaving very little discretion for the CMSM.

CHILD CARE

Subsidy is provided through a **needs test** which first compares asset levels to the allowable family maximums. The assessed monthly budgetary need is then deducted from monthly income to determine the income available for child care purposes. This available income is compared to the cost of the Child Care program and the shortfall, if any, becomes the Child Care subsidy. Provincial guidelines give CMSMs significant discretion in establishing such items as ceiling levels for mortgages, rent, debt payments, etc.

SOCIAL HOUSING

The financial test used in Social Housing is an **income test** which relies primarily on the income of the family/individual to calculate subsidy. The user fee (rent) is typically calculated as 30% of the household income. The difference between this and the actual cost of the housing unit is the level of overall subsidy. If assets are viewed as income-producing, the interest earned is added to the total household income. If assets are not income-producing, an imputed income based on their appraised value is included in the calculation.

Overlap in Services

As mentioned earlier, there is overlap in the populations served by the three programs. During the course of the Working Group consultations, great interest was expressed in knowing what the amount of overlap was within each CMSM. This type of information is an important part of understanding the extent to which customer service could be enhanced under the various delivery scenarios a CMSM may choose to develop.

Conceptually, there are four types of overlap scenarios:

1. people who are OW participants in RGI units
2. people who are OW participants receiving Child Care fee subsidies
3. people who are receiving Child Care fee subsidies and living in RGI units
4. people who are receiving subsidies from all three programs

Unfortunately, there are few statistics available on client overlap. This reflects the fact that each of the three programs has evolved under separate statutes with different and independent administrative systems. The greatest amount of statistical information is available for the overlapping group of people receiving social assistance who are also in RGI units. This information exists simply because it is collected by the information system used by most CMSMs to deliver Ontario Works, namely CIMS, the Comprehensive Income Maintenance System.

Even then, the CIMS statistics need to be used with a number of qualifiers. They do not distinguish between different types of RGI units other than to break down OHC units from all other types of RGI units. As a result, they do not provide a useful planning tool at a detailed level. For example, it is not possible to determine the overlap that will exist once the RGI units remaining under federal administration are separated.

Furthermore, there are other limits on the accuracy of the overlap between social assistance and RGI units. The number of RGI units intended for seniors and non-seniors is not easily identified. This makes it difficult to measure the overlap for the non-senior group, i.e. the proportion of RGI units intended primarily for the non-elderly population which are occupied by people on social assistance.

Despite such limitations, the statistics on the social assistance/RGI overlap do indicate a significant degree of overlap -- about 32% -- even though the number of units primarily for seniors is included.

If the estimated number of units primarily for seniors (about 55,000) is removed from the calculation, this leaves about 133,000 RGI units for non-seniors. The resulting social assistance/RGI overlap becomes about 45%. In the interests of providing CMSMs a starting point for their own analysis, the table on the following pages shows the number of social assistance recipients in each CMSM compared to the total number of RGI units in each CMSM. Separate figures are provided for OW and

ODSP in each of OHC units and other types of RGI housing.

Those using the table for local planning activity are cautioned that it should be viewed as a starting point only.

As stated, there are few other statistics available on client overlap. Some localized statistics are readily available on the overlap between participants in Ontario Works and those receiving Child Care fee subsidies, but these are often gathered in different ways and in different time periods, such that a province-wide picture is difficult to create.

Nevertheless, there appears to be a significant overlap in at least some CMSMs. For example, it is estimated that about 40% of those receiving fee subsidy in the City of Toronto and the Regional Municipality of Ottawa-Carleton are OW participants.

One final comment about overlap in services and the use of statistics. In most cases, the few statistics which are available are a 'snapshot' of only one point in time. That is, they do not reflect the dynamic nature of turnover in program clientele and tend to understate the extent to which the three programs have an involvement with the same people.

NOTE:

Insert two pages here - Excel Chart: Indicators of Client Overlap - Social Assistance & RGI Housing

INDICATORS OF CLIENT OVERLAP - SOCIAL ASSISTANCE AND RGI HOUSING

(The following table provides only anindication of the degree of overlap within each CMSM. It is assumed many CMSMs will wish to explore the degree of overlap within its own locale, including more detailed scenarios such as differentiating between RGI housing for non seniors and seniors.)

REGION	CONSOLIDATED MUNICIPAL SERVICE MANAGERS	OW			ODSP			OW + ODSP			#RGI UNITS	OVERLAP %
		OHC	Non OHC	TOTAL	OHC	Non OHC	TOTAL	OHC	Non OHC	TOTAL		
HAMILTON / NIAGARA	City of Brantford	214	128	342	249	60	309	463	188	651	1,684	38.7%
	Regional Municipality of Hamilton-Wentworth	815	520	1,335	897	580	1,477	1,712	1,100	2,812	9,312	30.2%
	Regional Municipality of Niagara	520	235	755	477	165	642	997	400	1,397	5,500	25.4%
	Regional Municipality of Haldimand-Norfolk	80	36	116	112	17	129	192	53	245	679	36.1%
SOUTH EAST	City of Kingston	302	93	395	374	75	449	676	168	844	2,097	40.2%
	County of Hastings	233	123	356	304	67	371	537	190	727	1,986	36.6%
	County of Lanark	160	26	186	123	11	134	283	37	320	771	41.5%
	United Counties of Leeds and Grenville	167	23	190	159	31	190	326	54	380	989	38.4%
	County of Lennox and Addington	51	40	91	65	15	80	116	55	171	563	30.4%
CENTRAL EAST	County of Simcoe	304	195	499	349	201	550	653	396	1,049	2,967	35.4%
	Regional Municipality of York	165	251	416	170	213	383	335	464	799	4,154	19.2%
	Regional Municipality of Durham	435	315	750	344	222	566	779	537	1,316	4,596	28.6%
	County of Victoria	64	76	140	84	59	143	148	135	283	817	34.6%
	County of Northumberland	49	44	93	64	33	97	113	77	190	700	27.1%
	City of Peterborough	230	168	398	184	52	236	414	220	634	1,576	40.2%
NORTH EAST	District Municipality of Muskoka	38	28	66	78	9	87	116	37	153	428	35.7%
	Cochrane DSSAB	236	153	389	236	63	299	472	216	688	1,698	40.5%
	Nipissing DSSAB	190	87	277	235	72	307	425	159	584	1,655	35.3%
	Parry Sound DSSAB	29	33	62	39	20	59	68	53	121	308	39.3%
	Timiskaming DSSAB	24	21	45	77	19	96	101	40	141	590	23.9%
EASTERN	Regional Municipality of Ottawa-Carleton	2,673	1,526	4,199	2,211	1,468	3,679	4,884	2,994	7,878	17,204	45.8%
	United Counties of Prescott and Russell	84	27	111	75	29	104	159	56	215	678	31.7%
	County of Renfrew	190	27	217	315	32	347	505	59	564	1,286	43.9%
	City of Cornwall	274	112	386	197	34	231	471	146	617	1,825	33.8%

REGION	CONSOLIDATED MUNICIPAL SERVICE MANAGERS	OW			ODSP			OW + ODSP			#RGI UNITS	OVERLAP %
		OHC	Non OHC	TOTAL	OHC	Non OHC	TOTAL	OHC	Non OHC	TOTAL		
NORTHERN	Algoma DSSAB	87	50	137	84	28	112	171	78	249	567	43.9%
	Sault Ste. Marie DSSAB	268	102	370	252	90	342	520	192	712	1,814	39.4%
	*Kenora DSSAB	58	19	77	128	41	169	186	60	246	959	25.7%
	Manitoulin & Sudbury DSSAB	36	28	64	47	14	61	83	42	125	398	31.4%
	*Rainy River DSSAB	24	8	32	31	72	103	55	80	135	439	30.8%
	Regional Municipality of Sudbury	642	208	850	570	137	707	1,212	345	1,557	3,644	42.7%
	Thunder Bay DSSAB	552	142	694	334	312	646	886	454	1,340	3,807	35.2%
TORONTO	City of Toronto	10,490	775	11,265	6,704	5,026	11,730	17,194	5,801	22,995	72,276	31.8%
SOUTH WEST	* City of St. Thomas	124	40	164	118	80	198	242	120	362	928	39.0%
	* County of Huron	52	17	69	127	21	148	179	38	217	522	41.6%
	City of London	830	464	1,294	749	174	923	1,579	638	2,217	5,857	37.9%
	County of Oxford	69	44	113	175	16	191	244	60	304	995	30.6%
	* City of Stratford	50	16	66	150	42	192	200	58	258	990	26.1%
	* County of Bruce	67	22	89	68	0	68	135	22	157	616	25.5%
	County of Grey	78	19	97	102	41	143	180	60	240	1,238	19.4%
	City of Windsor	894	259	1,153	591	235	826	1,485	494	1,979	5,832	33.9%
	Municipality of Chatham-Kent	176	114	290	191	48	239	367	162	529	1,301	40.7%
	County of Lambton	193	29	222	170	27	197	363	56	419	1,148	36.5%
CENTRAL WEST	County of Dufferin	15	35	50	16	6	22	31	41	72	502	14.3%
	Regional Municipality of Halton	121	227	348	129	106	235	250	333	583	3,038	19.2%
	Regional Municipality of Peel	429	458	887	333	473	806	762	931	1,693	8,926	19.0%
	Regional Municipality of Waterloo	503	297	800	331	178	509	834	475	1,309	5,726	22.9%
	County of Wellington	227	83	310	309	99	408	536	182	718	2,418	29.7%
TOTAL		23,513	7,745	31,258	19,127	10,813	29,940	42,640	18,558	61,198	188,004	32.6%

NOTES:

1. Non-OHC means any type of provider other than OHC and includes rent supplement units.
2. #RGI Units includes municipal non-profit, private non-profit, co-operative housing units and rent supplement.
3. Social assistance figures exclude on-reserve RGI units.
4. RGI units are as of September 1999, social assistance figures are as of October 1999.
5. Excludes supportive housing units that have been transferred to MCSS and Ministry of Health and Long-Term Care.
6. Excludes units being transferred to province under recently signed federal provincial agreement.

* Indicates the CMSM is not using CIMS at present. The total OW caseload for these six municipalities is 4060. For purposes of the table , the proportion of OW participants in accommodation ACC03 is assumed to be 9.2% and in ACC04, 3.0%. This is the average % experienced in the other 41 CMSMs.

VII. OVERVIEW OF MAJOR BUSINESS PROCESS INITIATIVES

As has been noted, the three programs have existed in relative isolation. Not surprisingly, each has taken a somewhat different course in terms of developing basic business processes. The purpose of this section is to provide an overview of the major current and planned business processes in each program, with an emphasis on the use of information technology as an integral feature of an efficient financial testing function.

Ontario Works

The delivery of social assistance depends heavily on technology. Given the detailed rules governing the program, extensive information is needed. The resulting database is massive. The system must be able to bring forward cases for review, generate letters, calculate payments, etc.

Historically, the province has encouraged municipalities to become users of one system -- the Comprehensive Income Maintenance System (CIMS) -- which was developed in the early 1980's. Over time, an increasing number of municipalities have done so. CIMS is also used by MCSS as the key system for the Ontario Disability Support Program, which is delivered by the province.

However, CIMS has a number of shortcomings. For example, it is devoted almost entirely to the provision of financial assistance and is of extremely limited use in the provision of employment assistance under the *Ontario Works Act*.

The Automating Social Assistance Project (ASAP) developed and implemented two interim application systems – Caseworker Technology (CWT) and Ontario Works Technology (OWT). These systems will be replaced with new technology through the Business Transformation Project (BTP) to support the reform of social assistance.
The Ministry, in partnership with Andersen Consulting (Common Purpose Procurement Agreement), is developing a Service Delivery Model (SDM) for new business processes and new technology to support the delivery of Ontario Works and the Ontario Disability Support Program.

Through the SDM, social assistance will be transformed into a streamlined, efficient system featuring a common province-wide centralized database, telephone screening for eligibility at Intake Screening Units, and an automated telephone system, Interactive Voice Response (IVR), to provide general program information and specific case information.

Within the scope of the BTP is replacement of the existing CIMS, CWT, and OWT systems with one common province-wide database for social assistance. Computer hardware rolled out as part of ASAP will be used to access the new applications developed by the BTP.

The intent, which is reinforced in recent legislation, is for all CMSMs and MCSS to be using the same technology and the same key business processes in the new delivery system for social assistance. The technology will consist of a single application on a single computer with real-time on-line access to social assistance case information.

Through the improved business processes and technology of the SDM, time spent on administration will be reduced, customer service will be enhanced, and fraud will be reduced. The technology being developed by the BTP should be sufficiently flexible to allow for future modification beyond the term of the project, e.g. to allow for additional income financially-tested programs to be added.

The design for the new SDM has been completed, including business processes and technology. Piloting of the new two-step Intake process and Interactive Voice Response system for general inquiries, with supporting technology, will begin in 2000.

Child Care

The use of computer technology in the delivery of Child Care fee subsidies is a more recent development than in social assistance. As the Child Care system has evolved along different paths in each municipality, consistent with the historically discretionary status of the program, the unsurprising result has been a variety of different business processes and computer systems in each jurisdiction.

The Service Manager's Module of the Ontario Child Care Management System has been released to 14 CMSMs. This automated system was developed through a partnership between the province and CMSMs. It will provide the tools needed to administer fee assistance and funding for resource centres, special needs resourcing and wage subsidy. Whether this model becomes a standard used by all CMSMs remains to be seen.

There is one point of contrast with Ontario Works - the basic elements of a service delivery model for the delivery of Child Care are primarily within the domain of the CMSM, while the key features of Ontario Works delivery are being addressed from a province-wide perspective.

Rent-Geared-to-Income Housing

The business processes used to undertake the financial testing function in RGI housing reflect the wide variation in organizations involved as providers. At one end of a spectrum are large organizations such as the Metro Toronto Housing Authority with more than 30,000 units. At the other are small independent co-ops or non-profit providers with 20 to 30 units or less.

The result is a wide variation in the use of technology in performing the tasks related to financial testing. Some providers have sophisticated software which they have developed on their own. Others are at the pen and paper stage, which may suit local circumstances but is a barrier to being part of a larger information system. Given the independence of each provider, there is undoubtedly a wide variety of technologies in use. Until now, there has not been any concerted study of the possible benefits of one computer system or one set of business processes for providers to use.

General Observations

The 'state of the nation' varies greatly across the three programs, insofar as business process developments are concerned. Where activities are underway, they are well along the way and have a life and momentum of their own and appear poised to achieve real efficiencies.

Accordingly, the Working Group restricted the scope of its deliberations and recommendations to the long term, assuming the new automated service delivery system for Ontario Works will already be in place. The question addressed in Part C of this report is: Given the expected design of Ontario Works technology, to what extent should it be considered a vehicle for one or both of the other two programs, or at least certain functions which are common to the programs?

VIII. INFORMATION USE AND DISCLOSURE

Surveillance - *"supervision, close observation, ...especially of suspected person"* (Oxford dictionary)

The combination of high-speed computers and modern telecommunications gives many people the feeling they are being watched constantly. The technological ability to monitor, track and observe people is not only clearly established; its capacity is increasing constantly.

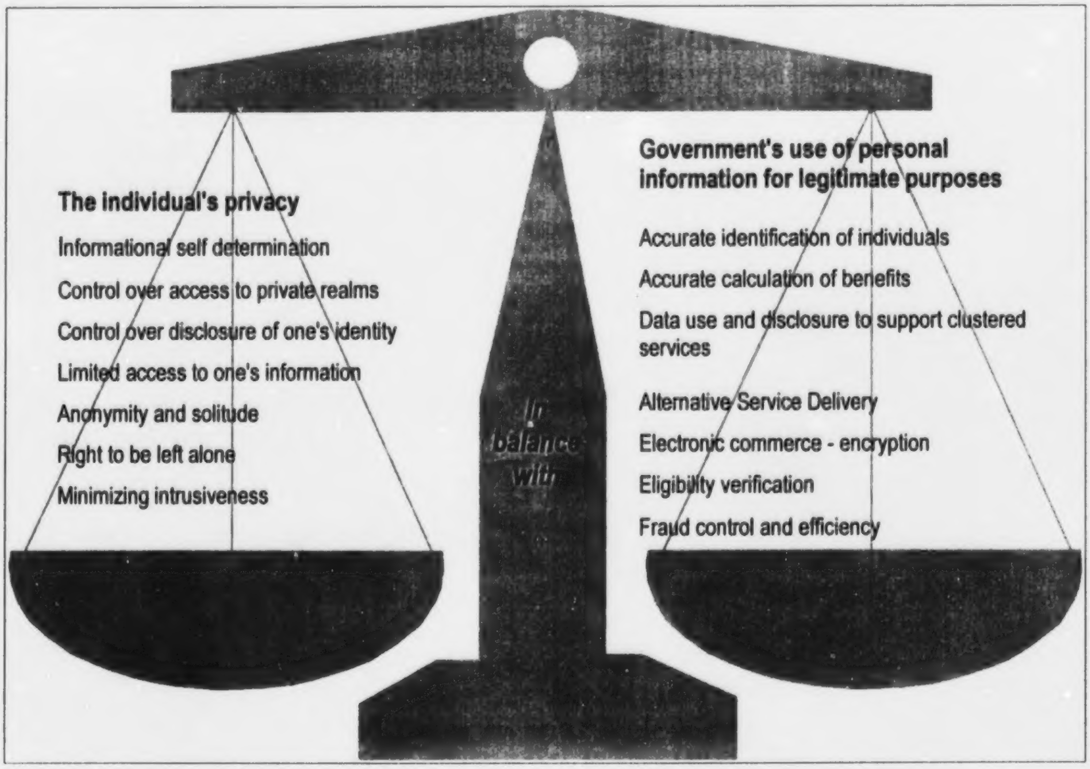
The Working Group fully supports the use of fair information practices, as enunciated in the *Freedom of Information Protection of Privacy Act,* designed to respect the human need for privacy. Such practices include:

- limiting the collection and use of personal data to that required by law,
- obtaining informed consent,
- being open about information practices, and
- ensuring the holders of data are accountable.

People applying for financially tested social services may believe they are not in the position to withhold consent to the use of their personal information or they will jeopardize their eligibility. This needs to be taken into account in establishing practices and procedures, to ensure that clients:

- understand how their personal financial information will be used,
- are aware of who else may have access to it, and
- give consent for disclosure.

Determining just how much information to collect and the terms and conditions under which it can be disclosed is often a matter of balancing the individual's privacy and the government's need of personal information for legitimate purposes, as elaborated below.



The individual's privacy

- Informational self determination
- Control over access to private realms
- Control over disclosure of one's identity
- Limited access to one's information
- Anonymity and solitude
- Right to be left alone
- Minimizing intrusiveness

Government's use of personal information for legitimate purposes

- Accurate identification of individuals
- Accurate calculation of benefits
- Data use and disclosure to support clustered services
- Alternative Service Delivery
- Electronic commerce - encryption
- Eligibility verification
- Fraud control and efficiency

In addition to the need for a balanced approach, the Working Group noted the extent to which public support for financially tested programs relies on demonstrating that the subsidies provided to individuals are accurate. Thoroughness in obtaining information and the capacity to compare it with information provided by the same person elsewhere is a necessity if the public is to have reasonable assurance that their tax dollars are being used as intended.

This type of thoroughness does not equate with infringing on the privacy of the individual, provided the appropriate protections are in place. For example, the Ministry of Community and Social Services has, for Ontario Works purposes, expanded its capacity to share and validate information with other organizations through cross-jurisdictional agreements, while still ensuring that personal information remains secure.

Information sharing issues that relate to the three program areas include the following:

- To what extent should information provided by a person accessing one program be used in the other two program areas?
- Should there be a common client identifier for all three programs to make it easier to match and verify information?
- What legal authorities and protections exist now in the legislation and what authorities and protections should be added?

The Working Group recognized that addressing such issues required expertise outside its membership. As a result, any of its draft recommendations that appeared to relate to information use and disclosure were shared with staff at Management Board Secretariat. Their informal feedback was appreciated.

PART B – SERVICE DELIVERY MODELS

Part A of this report provided much of the necessary context, such as individual program objectives and basic characteristics. Part B takes a service system view of the programs, both individually and collectively. It also develops optional models for service delivery for CMSMs and stakeholders to consider.

I. VISION STATEMENT

The following is suggested as a vision statement for CMSMs to consider as they develop service systems within their jurisdictions:

> In their role as service system managers, CMSMs establish a harmonized system in which the key business processes of financially tested programs result in excellent and consistent service to clients, are effective in achieving program objectives, and are conducted efficiently.

A vision statement by itself provides only partial guidance for designing business processes. Accordingly, design and delivery principles were developed to clarify the vision statement. These principles were used by the Working Group to ensure that the recommendations made were consistent with the vision.

II. DESIGN AND DELIVERY PRINCIPLES

The nine principles on the following two pages provide a framework for achieving effectiveness, efficiency, and excellent customer service. Each principle is illustrated using concrete examples of how it may appear in practice.

The service systems of CMSMs should be:

ACCESSIBLE

- clients can easily obtain answers to their questions
- system of services appears seamless and transparent to clients
- clients can readily access program staff responsible for conducting the financial test
- special requirements related to language, disability, etc. are addressed

RESPECTFUL

- clients are treated in a professional, objective, respectful manner
- clients receive services at the time they are needed

INDIVIDUALIZED

- services are provided in a manner that meets special needs of clients
- services are culturally sensitive
- service providers tailor the level of service in response to client ability to participate independently in the course of receiving services

RESPONSIVE

- the service system responds quickly to changes in the client's financial status
- to the extent possible, service providers recognize the self-sufficiency of clients by encouraging clients to actively participate in business processes

OPEN

- clients are informed of other types of financial assistance and services for which they may be eligible and which may be appropriate for them
- clients are fully informed about how their personal information will be used before being asked for their consent to release information
- clients are informed of their right to an appeal/review

FLEXIBLE

- service delivery can be readily adapted to program and policy changes
- service delivery can readily be extended to new service areas
- CMSMs design business processes to reflect unique local circumstances and

needs, to the extent allowed by the legislation and directives

FAIR

- financial testing rules are applied consistently within and across CMSMs
- decisions can be appealed to/reviewed by someone other than the person who made the original decision

ACCURATE

- all relevant client information is obtained and verified
- financial information is updated in a timely fashion
- rules are applied in accordance with provincial legislation and directives, including laws governing privacy

EFFICIENT

- existing information is used wherever possible
- whenever possible, activities are carried out only once
- the amount of staff time spent on a financial testing activity is in keeping with the dollar amounts involved
- generalist and expert staff are deployed according to the task requirements
- required information is conveyed in a timely fashion

III. SERVICE SYSTEM MANAGEMENT

Section II of Part A touched on Local Services Realignment as the key driver of the new context for CMSMs. However, it made only passing reference to the concept of CMSMs as service system managers.

The responsibility of designing a local service delivery model lies with the service system manager. In that regard, it is important to understand what a service system is, and what challenges confront each CMSM in its establishment.

A service system consists of a set of defined and interrelated services to a particular target group. The key variables that determine the scope and breadth of a service system are how you define the target group and which services you include or exclude. Those involved in a human services system often include provincial government ministries, municipal governments, local planning and coordinating bodies, and service deliverers in the voluntary and for-profit sectors. Users and their advocates are also involved.

Service systems lie on a continuum of integration. At one end, the service providers are a loosely knit group with some minimal degree of coordination among services. Examples would include services that are co-located or share the cost of a common receptionist. At the other end is a highly integrated service system in which:

- all the participants share a vision of what they are trying to accomplish and how they should work together to achieve their goal,
- services are coordinated, complementary and accessible,
- the shape of the system is driven by the needs of people and not by administrative needs, and
- the organizational structure supports service integration.

Where a service system falls on the continuum depends on a variety of factors, such as,

- community priorities,
- the scope and breadth of the service system,

- the funding, legislative, and policy parameters,
- the leadership and management approach within the governing organization,
- the degree of commitment on the part of workers in the organizations, the managers, the governing body, and other partners, and
- the experience an organization has in being a service system manager.

At the same time as they are grappling with complex programs and sensitive service delivery issues, CMSMs will need to meet a range of challenges in their role of service system managers:

- developing a vision that all stakeholders share and will work toward,
- allocating and reallocating resources in a way that helps achieve the vision, staying focused on outcomes and priorities by aligning organizational policies, plans and management processes,
- working in partnership rather than competition,
- managing a greatly expanded set of relationships with agencies and stakeholders,
- helping internal and external stakeholders learn more about the concept of service system management and how to access it,
- managing these new programs in an environment inundated with changes from within and without, and shaping them into a true system of services,
- leading people and organizations to make difficult choices,
- managing the tension involved in playing the dual role of service system manager and service deliverer, and
- balancing between focusing on future directions and ensuring quality of current programs.

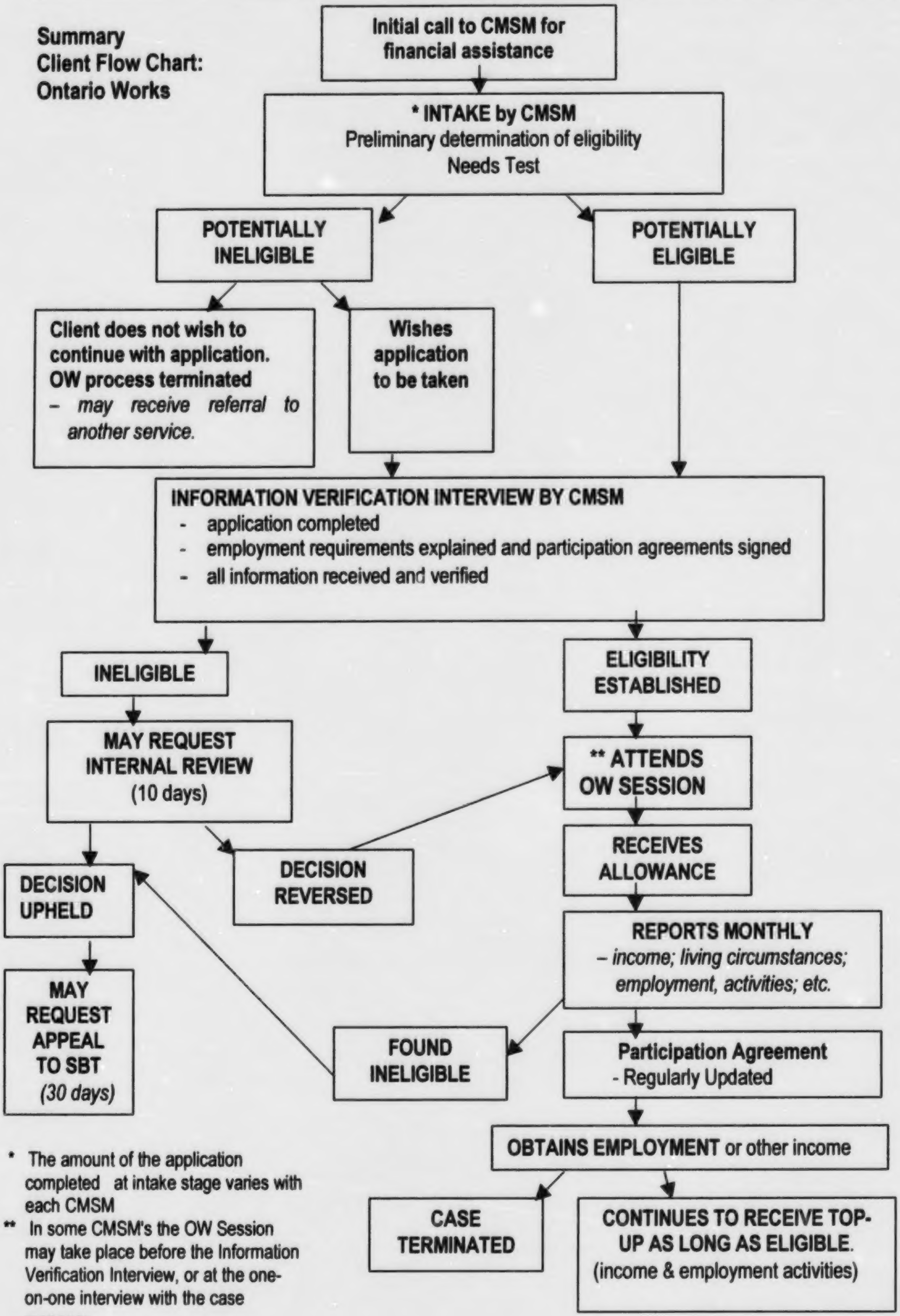
Most importantly, the focus must stay on meeting the needs of clients, for whom the services are so essential.

IV. THREE TYPICAL CLIENT PATHWAYS

As has been mentioned, most readers of this report will likely have working familiarity with one or possibly two programs, but likely not all three. A powerful tool in terms of describing and analyzing service delivery models is the client pathway or flowchart.

These are presented on the following pages in somewhat simplified form. That is, they are high level visual summaries only and in no way capture all of the elements involved in the application, eligibility determination and monitoring processes of these programs.

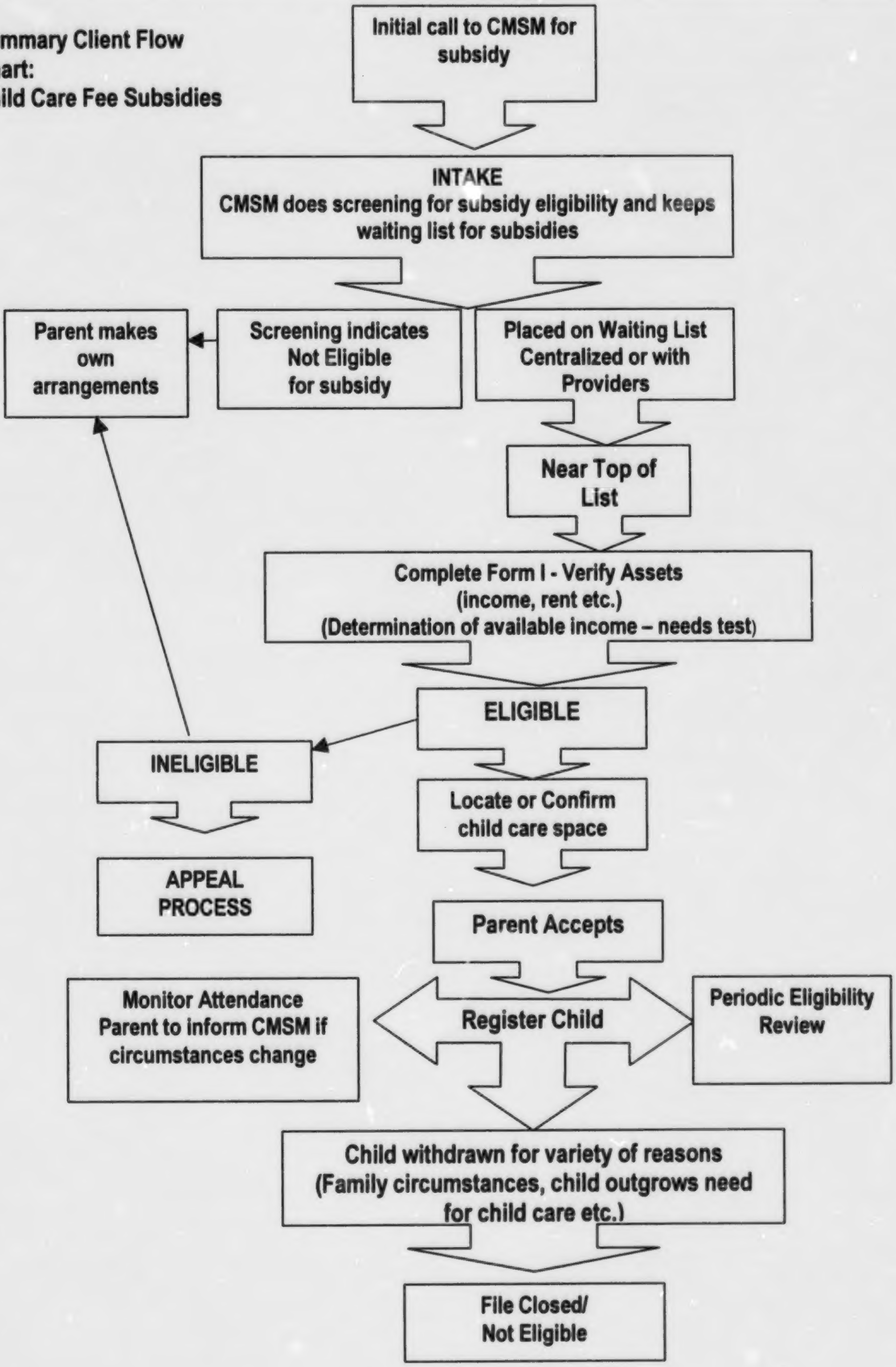
Summary
Client Flow Chart:
Ontario Works


Initial call to CMSM for financial assistance
* INTAKE by CMSM
Preliminary determination of eligibility
Needs Test
POTENTIALLY INELIGIBLE
POTENTIALLY ELIGIBLE
Client does not wish to continue with application. OW process terminated
– may receive referral to another service.
Wishes application to be taken
INFORMATION VERIFICATION INTERVIEW BY CMSM
- application completed
- employment requirements explained and participation agreements signed
- all information received and verified
INELIGIBLE
ELIGIBILITY ESTABLISHED
MAY REQUEST INTERNAL REVIEW
(10 days)
** ATTENDS OW SESSION
DECISION UPHELD
DECISION REVERSED
RECEIVES ALLOWANCE
REPORTS MONTHLY
– income; living circumstances; employment, activities; etc.
MAY REQUEST APPEAL TO SBT
(30 days)
FOUND INELIGIBLE
Participation Agreement
- Regularly Updated
OBTAINS EMPLOYMENT or other income
CASE TERMINATED
CONTINUES TO RECEIVE TOP-UP AS LONG AS ELIGIBLE.
(income & employment activities)

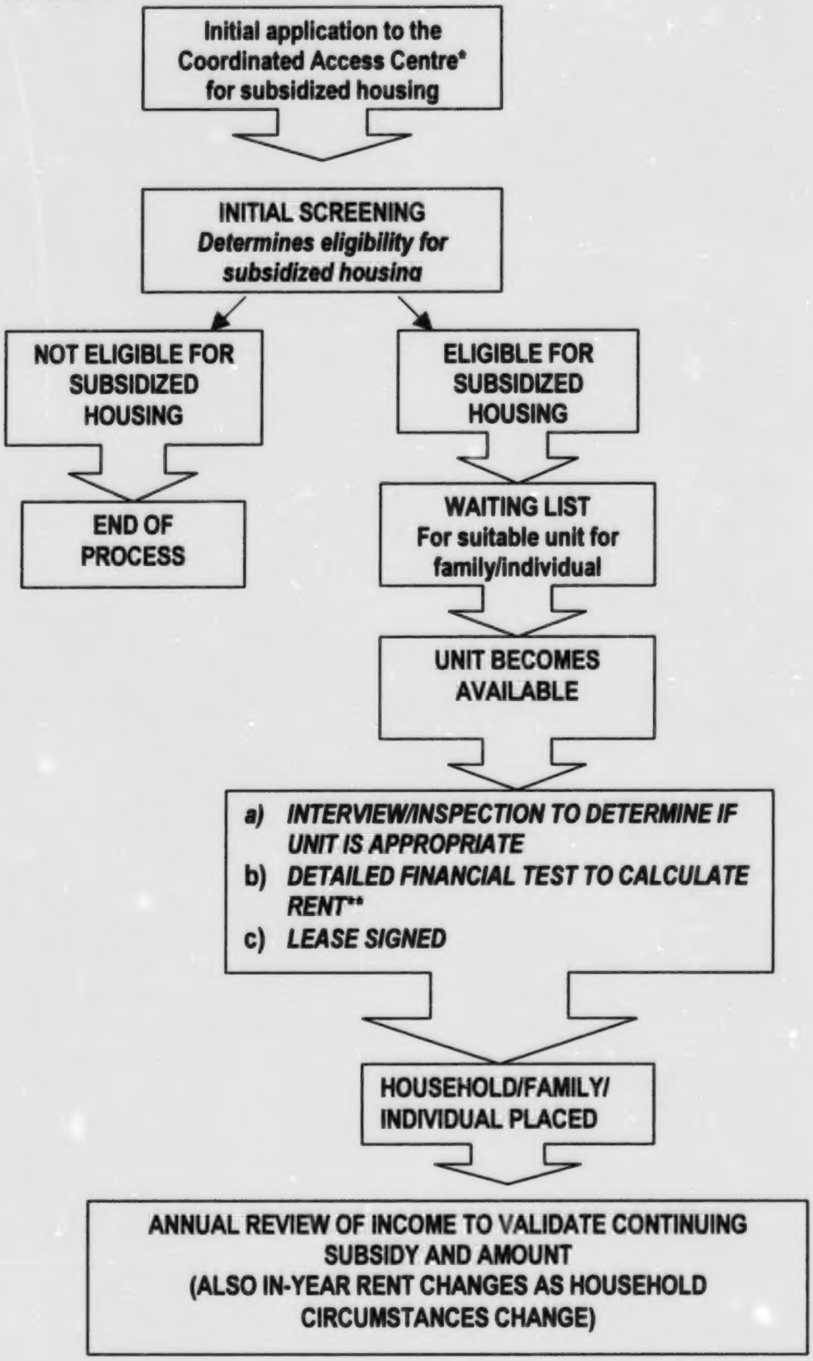
* The amount of the application completed at intake stage varies with each CMSM

** In some CMSM's the OW Session may take place before the Information Verification Interview, or at the one-on-one interview with the case manager.

Summary Client Flow Chart: Child Care Fee Subsidies


Initial call to CMSM for subsidy
INTAKE
CMSM does screening for subsidy eligibility and keeps waiting list for subsidies
Parent makes own arrangements
Screening indicates Not Eligible for subsidy
Placed on Waiting List Centralized or with Providers
Near Top of List
Complete Form I - Verify Assets (income, rent etc.) (Determination of available income – needs test)
ELIGIBLE
INELIGIBLE
Locate or Confirm child care space
APPEAL PROCESS
Parent Accepts
Monitor Attendance Parent to inform CMSM if circumstances change
Register Child
Periodic Eligibility Review
Child withdrawn for variety of reasons (Family circumstances, child outgrows need for child care etc.)
File Closed/ Not Eligible

Summary Client Flow Chart:
RGI Housing


Initial application to the Coordinated Access Centre* for subsidized housing
INITIAL SCREENING
Determines eligibility for subsidized housina
NOT ELIGIBLE FOR SUBSIDIZED HOUSING
END OF PROCESS
ELIGIBLE FOR SUBSIDIZED HOUSING
WAITING LIST
For suitable unit for family/individual
UNIT BECOMES AVAILABLE
a) *INTERVIEW/INSPECTION TO DETERMINE IF UNIT IS APPROPRIATE*
b) *DETAILED FINANCIAL TEST TO CALCULATE RENT***
c) *LEASE SIGNED*
HOUSEHOLD/FAMILY/ INDIVIDUAL PLACED
ANNUAL REVIEW OF INCOME TO VALIDATE CONTINUING SUBSIDY AND AMOUNT
(ALSO IN-YEAR RENT CHANGES AS HOUSEHOLD CIRCUMSTANCES CHANGE)

* CAC is a place where applicants can go to find out about the social housing in the area and complete a common application form. The site of the CAC has been chosen by the providers in the area.

** Income test administered by Social Housing provider of unit chosen.

V. WHY PATHWAYS DIFFER

There are some fundamental differences in the pathways, which are in turn shaped by the fundamental characteristics of each program. These differences may seem intuitively obvious but they are worth exploring since they point to the issues that must be addressed by each CMSM as it works towards the concept of an overall service delivery model.

Ontario Works

For applicants to Ontario Works financial assistance, speed of service is of great importance. The 'service' is quite homogeneous in most instances (money and a drug card) and there is unlimited supply of the 'service' insofar as government rules require assistance to be quickly issued to everyone who qualifies.

This means that OW intake, waiting list management and financial testing all have to occur in a matter of days. There is a tendency to have only one department involved since the handoff from intake and waiting list to financial testing must occur each and every time and must happen as close to 'real time' as possible.

RGI Housing

For those seeking access to RGI dwellings, speed of service is of lesser importance than OW, **IF** the applicant already has some form of reasonable accommodation. However, since this is often not the case, prioritizing criteria are in place to ensure those at risk are served as quickly as possible. Otherwise, a 'first come, first served' principle can operate fairly. Unlike OW, the actual service itself is not homogeneous. This is because each dwelling unit in each community's inventory is unique, varying in size of unit, building amenities, geographic location, reputation of building, etc. Units within buildings also vary on some dimensions, e.g., size, location, etc. This means each person who reaches the top of the list must be 'notified' of an available dwelling unit that suits their need for a certain number of bedrooms, geographic location, amenities for people with handicapping conditions, etc.

Unlike Ontario Works, the demand outstrips the supply. This means there is a long time period between first intake and actual access to the service. It also means that financial testing can take place as the applicant's name approaches the top of the waiting list. In turn, this permits time for a separate organization to become involved in financial testing in an anticipatory context, with time to obtain verification of all aspects of the applicant's financial circumstances up front.

Child Care Fee Subsidies

There are strong parallels with RGI housing. Speed of service is typically less important than in OW, assuming some sort of interim arrangement is in place for Child Care. As in RGI:

- prioritizing criteria are in place for some on the waiting list (e.g. spaces designated for OW clients, CAS referrals, LEAP participants), and
- a 'first come, first served' approach is typically used.

The service is not totally homogeneous, since each centre has its own advantages (both real and perceived) in terms of location, reputation, hours of service, ages of children served, philosophy of child development, etc. Consequently, when a subsidized space becomes available, clients usually 'shop' for a centre that best meets their criteria (although some CMSMs play a more active role in matching clients with particular providers).

Demand outstrips supply in most, but not all CMSMs. In turn, this means the CMSM usually keeps a waiting list of all those who have applied for fee subsidies. The financial testing and verification can take place in anticipation of a subsidy becoming available.

VI. MAJOR TRENDS IN SERVICE DELIVERY

As if the previously mentioned challenges faced by service system managers were not enough, mention must be made of the many sweeping types of changes confronting all organizations, especially governments.

Governments are under increasing pressure to 'reinvent' themselves to show they are constantly doing better – serving people better and at lower cost. This section makes only passing reference to some of the major trends underway:

- **technology**; without a long term plan to use computer and telecommunications technology across the three programs, there are significant limits to the efficiencies that can be realized
- **'single window' service clusters**, in which one front counter is the entry point for several services
- **Interactive Voice Response**, in which a customer can provide information via a touch tone phone to update their own client file (e.g. report earnings for the month)
- **citizens' charters**, in which a governmental organization publicly commits to a given standard of service
- **continuous improvement**, in which an organization is constantly improving its business processes to serve the customer better and/or save money
- **outcome funding**, i.e. the clear expectation of relevant and measurable performance outcomes as a basis for payment of money
- **client satisfaction surveys** to measure what customer expectations were, whether they were met or not, and obtain ideas for improvements
- **peer reviews**, in which another organization in the same business conducts a review of the documented business processes relative to actual performance
- **quality accreditation**, such as ISO9000, or application for a Malcolm Baldridge service quality award
- **co-location**, whereby two organizations which are interrelated in some way, occupy a common space. At a minimum, this can **facilitate joint planning**, a common reception area, better and more efficient referrals to each other, save time and effort for common clients. These benefits can often be realized without any formal changes in mandates or funding
- **decentralization of decision-making** to the most appropriate level
- **'retailing' government services**, i.e. small offices in modest, rented accessible spaces, mixed in with a range of unrelated businesses, rather than the traditional approach of large institutional buildings in areas zoned for the broader public sector
- **kiosks,** or computer terminals in public spaces, which clients can use to apply for a service, provide information to their file, get information on their status in the program, get information about the program or related programs, etc.
- **best practices activities**, in which two or more organizations compare various features of their operations, to see what they can learn from each others' experiences.

CMSMs have no choice but to view the new LSR configuration as an opportunity to demonstrate that, as service system managers of a new range of human services, they can 'do better with less'. The above approaches are merely a short list they will have to explore to make the most of this opportunity.

VII. PURCHASE OF SERVICE AGREEMENTS

Section VI briefly covered many of the major trends in service delivery, but did not include one of the most prevalent – the contracting out of work traditionally done by civil servants, to non-government bodies. This particular trend merits attention, since the decision to contract out or not, is so fundamental.

Each of the three program areas has in the past operated with different approaches on this issue:

- For Ontario Works financial assistance, the province has historically been reluctant to permit contracting out; even then the discussion has concentrated almost exclusively on the overpayment recovery function, as opposed to intake, eligibility determination and ongoing case management.
- For Child Care, financial testing has been done by municipal staff or approved corporations, which are non-profit.
- For RGI housing, financial testing has been done by the providers generally (i.e. government staff or non-profit corporations). However, some providers have contracted this function out to property management firms (for-profit corporations) along with a number of other functions usually associated with running an apartment or townhouse complex.

Today, the possibilities for contracting out are under great scrutiny. In the case of Ontario Works, the Minister's regulation requires the eligibility decision function to remain with a CMSM. In Child Care, it appears CMSMs will assume this function from approved corporations. Therefore, it is in the realm of social housing where contracting out issues are most significant.

There are various schools of thought as to the amount of flexibility CMSMs should have in terms of housing programs:

1) some feel that financial testing should only be done by government workers
2) others contend it is appropriate for either government staff or staff of non-profit corporations to do this kind of work
3) still others maintain any type of incorporated organization should be permitted to do this type of work

Naturally, the reasons for each position vary considerably. Those with the 'government only' view feel such confidential information should only be collected and stored in organizations which are clearly and most directly accountable to people via elected officials. In their view, only a government organization has the 'critical mass' to guarantee continuity for service to vulnerable people.

People in the second school (either government or non-profit) argue that non-profit corporations are capable of acting in the best interests of vulnerable people and will deal sensitively with all clients -- including the hard-to-serve who may have behavioral problems. The accountability to a Board of Directors who wish to donate their time in a field of public interest helps ensure service quality and keep costs down.

Finally, in the third group are those who observe that any routine, repetitive function with clear rules and customer service standards can be done by any organization that is well run. It would be unfair to restrict an enterprise from bidding on this work merely because they make a profit in the process.

During the course of consultation, housing providers made the point that they are in the best position to act in a timely, efficient and sensitive way in the interest of vulnerable people -- including the hard-to-serve who may have behavioural problems. Housing providers are on site, can offer one-stop-shopping, can deal with the information, or track down information immediately, have evening hours, can look out for the interests of other tenants, are able to provide services beyond the confines of an office, and are generally paid less than government employees. Housing providers point out that their volunteer Boards of Directors have a vested interest in maintaining the efficiency and integrity of their project.

It should be noted that those in the non-profit, public and co-op housing sector see financial testing and property management as seamlessly integrated functions. They do not see a one-on-one staff trade off, should the financial testing function be moved to the CMSM. The provision of property management along with financial testing allows for staff to quickly notice irregularities in tenant income and their living schedules, leading to quick adjustments in rental recalculations and fraud detection.

It is expected the authority of CMSMs to contract this out will be addressed by the Ministry of Municipal Affairs and Housing as it considers options concerning devolution of social housing.

VIII. POTENTIAL MODELS FOR THE FINANCIAL TESTING FUNCTION

Key Assumptions

In assessing service delivery models for the financial testing function, the first key assumption of the Working Group is that:

> *The CMSM will have the flexibility to decide the most effective and efficient model of delivery, subject to provincial legislation and funding requirements.*

This is consistent with the recommendation of the Social Housing Committee (#38) which reads as follows:

> "The Social Housing Committee recommends that income verification be a municipal responsibility. CMSMs will have the flexibility to delegate all or part of this function to providers or others."

Whether or not this recommendation will be reflected in the new provincial social housing legislation, expected to be introduced as part of the devolution of administration, remains to be seen. However, without this basic assumption, it is extremely difficult to assess delivery models with a view to their practicality.

The second key assumption pertains to financial testing for Child Care fee subsidies, which is already primarily carried out by municipal staff. It is assumed that this function will be assumed by CMSM staff in its entirety as LSR implementation proceeds. Given this assumption, there are fewer design variables for CMSMs to consider for Child Care, relative to social housing.

The third assumption pertains to Ontario Works. New legislation provides authority for CMSMs to purchase certain services, as opposed to having them carried out by municipal employees. For the purposes of this section of the paper, it is assumed the CMSMs administer all the functions of Ontario Works as it pertains to the administration of financial assistance.

Analytical Approach to Constructing Delivery Models

Given these three assumptions, a CMSM is in the position of:

- already delivering OW financial testing
- already delivering Child Care fee subsidies or will shortly be doing so
- deciding how the financial testing function should be conducted in RGI housing.

The most fundamental choices for a CMSM appear to be in the area of social housing. As a result, the next several pages are devoted to analyzing the kind of options available for that program. Options for financial testing for Child Care are then discussed.

With respect to social housing, the Working Group wished to put forward a fairly short list of delivery options from which CMSMs would be able to select. However, as the discussion proceeded on the various local characteristics that exist in each CMSM, it became clear that there was no such thing as a short list of all feasible options.

Nevertheless, there was found to be a consistent analytical path that each CMSM would likely have to walk to decide what type of financial testing system was most appropriate for social housing.

As a result, the approach taken was to:

- first, identify the key design variables
- second, identify the options that appear to exist for each design variable
- third, examine the relationship between design variables,
- fourth, introduce other factors that are likely to influence decisions, and
- finally, construct a manageable set of delivery scenarios to facilitate general discussion

Key Design Variables

Six variables were selected initially:

a. client group
b. type of provider
c. size of provider
d. specialist function vs 'regular' financial testing work
e. initial financial testing of new clients vs ongoing management of the function
f. internal CMSM organizational structure

Possible Options for Each Design Variable

A. CLIENT GROUP

Four client groups were initially identified:

- seniors
- people with disabilities
- people participating in Ontario Works
- people not identified above (primarily working at low incomes)

B. TYPE OF PROVIDER

Three types were selected:

- local housing authorities
- non-profits
- co-operatives

C. SIZE OF PROVIDER

Without attempting to determine where to actually draw the line, two 'types' were identified, namely:

- large providers
- small providers

The key point of differentiation in size relates to the 'critical mass' point at which a provider can reasonably be expected to devote sufficient time and attention to the financial testing function and/or specialty functions to meet the standards and expectations of the CMSM.

D. SPECIALIST FUNCTION VS. REGULAR FUNCTION

Most financial testing work can be seen as straightforward in nature. That is, it can typically be done without involving specialist staff. The Working Group identified three functions which appear to fall into the specialist category:

- reviews of decisions as requested by clients
- investigations for potential fraud
- pursuit of available resources, most notably child support

The options for the CMSM are whether to leave one or more of the specialized functions with the provider or have them done by municipal staff.

E. INITIAL FINANCIAL TESTING OF NEW CLIENTS VS ONGOING MANAGEMENT OF THE FUNCTION

This design variable rests on the assumption that there is merit in a system in which there is a transfer of responsibilities for financial testing from one organizational unit or entity to another, once a case has been accepted and all the up-front work has been completed. For example, one option would have the CMSM do all the up-front testing for a new client, then transfer the file to the provider to charge rents and verify ongoing income and eligibility.

F. INTERNAL CMSM ORGANIZATIONAL STRUCTURE

This variable relates to the extent to which a CMSM consolidates all or some responsibility for financial testing functions in one or more organizational units within the municipality. For example:

- all testing for all three programs is based in one unit,
- three separate units are each responsible for one program, or
- one unit handles two programs, while a separate unit does the third.

IX. RELATIONSHIPS BETWEEN DESIGN VARIABLES

Within each design variable, there are certain options that appear incompatible with other options elsewhere. For example, it would be contrary to the principles of streamlining services to contemplate the CMSM doing financial testing for seniors, but not people participating in Ontario Works who are in subsidized housing and are already clients of the CMSM.

It is important to identify which combinations of options simply do not fit together to make a coherent whole. Otherwise one is easily overwhelmed by all the possible permutations. In the forgoing section, there are no less than six variables, each with between two and four options. When one does the math, the number of combinations which exist, at least in theory, exceeds twenty thousand!

Naturally, the number of combinations drops quickly for each decision a CMSM makes. For example, the situation is simplified considerably if there is a clear position on the part of the CMSM that it will not differentiate at all between the various types and sizes of housing providers in terms of financial testing functions.

On the other hand, a CMSM that does not give some pause to each and every one of the design variables does so at its peril. In developing new relationships with social housing providers and making delivery decisions, it is preferable to "get it right" the first time, rather than implement one approach, only to change it later.

Other Factors in Choosing a Delivery Model

Unfortunately, the forgoing design variables are not the whole story in choosing the delivery model that is most suitable for a given CMSM. Many other factors are also instrumental in the decision-making process. This section merely identifies the major considerations. Each CMSM will have to do its own assessment of the situation in its community to determine just how each factor should influence its decision.

Seven factors have been identified:

SIZE OF LOCAL GOVERNMENT

Some delivery options would increase the number of municipally-employed staff; others would leave it essentially unchanged.

GEOGRAPHY

This pertains primarily to the ease with which clients are able to travel to municipal offices given factors such as availability of public transit, location of social housing units, etc. Many users of RGI housing are elderly or disabled, making geography a major factor. In Northern Ontario, geography in particular stands out as a factor.

PHYSICAL LAYOUT AND LOCATION OF MUNICIPAL OFFICES

This can facilitate streaming of client groups. For example, people in seniors RGI housing could all be streamed to a separate CMSM office if desired, or the CMSM office could even be co-located with one or more service provider's administration offices.

SAVINGS/COSTS TO LOCAL TAXPAYERS

It is extremely difficult to estimate the costs to local taxpayers for any given delivery scenario, yet this, along with customer service, is arguably the key factor. To estimate cost reliably involves, among other things, knowing how much of the budgets of existing providers is devoted to the financial testing function. As there is no requirement for providers to account separately for this specific type of cost, it would take a detailed on-site study to arrive at figures that could be used for decision making purposes. Moreover, it would be extremely difficult to estimate the accuracy rate of social housing providers in terms of charging rents, compared to the job a CMSM would do if it were to take over the function.

NUMBER OF ORGANIZATIONS CLIENTS MUST APPROACH

The social housing provider is already interacting with tenants on an ongoing basis concerning any number of matters. There is a service relationship which already exists. Moreover, the functions of financial testing, rent calculation and rent collection are interrelated to a degree. The customer may find it easier to always have one point of contact – the provider – for all rent related issues.

EASE AND ACCURACY OF INFORMATION FLOW

Some options make better use of information than others. For example, if the CMSM does the financial testing, it can do accurate and up-to-date calculations for people who are participating in Ontario Works and also in social housing, since all financial information exists with only one organization. On the other hand, information flows and documentation from tenants to providers can often be transmitted easily to providers who maintain staff 'on site'. Furthermore, tenants who observe one another may be prepared to approach their housing provider more readily than government with information affecting their neighbour's eligibility.

HUMAN RESOURCES

Some delivery scenarios leave staff with their current employer. Others involve complex issues related to collective agreements, successor rights, etc.

CUSTOMER SERVICE

This factor is an amalgam of some of the above factors, as well as many others. In the realm of customer service, in which 'the customer is always right' the views of people actually using one or more of the three services will have to be a major consideration for all CMSMs, balanced by the fact that the service level provided is always going to be a direct function of what local taxpayers are prepared to pay.

Constructing Delivery Scenarios for Social Housing

As mentioned, there are many different ways of getting financial testing done and each CMSM will have to undertake its own analysis. Having said that, the Working Group saw merit in putting forward some scenarios for consideration and comment.
Seven scenarios are described below. As discussed, there are literally thousands of variations. The following seven scenarios were the focus of most of the discussion during the consultation sessions.

SCENARIO ONE

Leave the financial testing and verification function with the providers. CMSM staff take over the level and type of monitoring and review currently being conducted by MMAH regional staff for each provider. (Note: this scenario could be considered to be either interim or long term.)

SCENARIO TWO

Leave the function with the providers, but have certain case situations (typically those which require specialized staff) referred to the CMSM (presumably the Ontario Works department) to undertake the specialized work and then inform the provider as to the results. The provider is still responsible for the overall function.

SCENARIO THREE

Leave the function with large providers. Take it over from small providers.

SCENARIO FOUR

Leave the function with small providers. Take it over from large providers (scenario added during consultation sessions).

SCENARIO FIVE

Leave the function with providers if a majority of their units are for seniors. Take it over from all other providers.

SCENARIO SIX

Initial financial test of new clients done by CMSM; providers do update for ongoing case management.

SCENARIO SEVEN

Take over the function from all providers in the geographic area.

Constructing Delivery Scenarios for Child Care

As mentioned, the delivery responsibility for financial testing for Child Care fee subsidies is a much clearer picture than for social housing. Under the *Day Nurseries Act*, CMSMs are responsible for ensuring that financial testing is carried out, although a few have chosen to delegate the function to other municipalities or approved corporations.

Some CMSMs have not been involved in financial testing for Child Care fee subsidies, rather, this function was performed by approved corporations. Over time, these CMSMs may choose to have their own staff assume the financial testing function for Child Care. If this occurs, then the major design issues pertain to how the CMSM will organize itself internally to carry out financial testing for fee subsidies.

In other CMSMs, one group of staff have historically performed the financial testing function for Child Care and another group for Ontario Works. In this case, the CMSM may consider bringing financial testing for Child Care and OW together so that staff are responsible for both. These functions, although they are done under two pieces of legislation, are quite similar. What is the best way of deploying these staff? What should the CMSM organizational structure look like?

These are not new issues for CMSMs. However, due to the LSR changes, their scale has increased. And although they are, in one sense, internal decisions, they can be seen as statements of philosophy as well. For example, having the financial testing for Child Care conducted in Ontario Works offices using OW staff may or may not be most efficient.

Regardless, it would likely be scrutinized for messages about how a municipal council views the objectives of the Child Care system.

From a customer service perspective, a number of considerations arise, such as the hours of access to service that low-income earners may require, the extent to which users feel they are being treated as social assistance clients, etc.

For consultation purposes, the Working Group put forward the following four delivery scenarios

SCENARIO ONE

Keep the financial testing for Child Care fee subsidies separate from Ontario Works (e.g. separate staff, offices, etc.).

SCENARIO TWO

Keep the separation of scenario One, except use specialized OW staff to undertake specific work (e.g. fraud investigation).

SCENARIO THREE

Merge the function with Ontario Works functions (e.g. a generically named unit called 'Financial Eligibility' or 'Eligibility Determination'). Financial testing for RGI housing continues to be done by providers.

SCENARIO FOUR

Merge the function with Ontario Works functions in a generically named unit. Financial testing for RGI housing is also done within the generically named unit.

X. POTENTIAL MODELS FOR INTAKE AND WAITING LIST MANAGEMENT

Introduction

As with the preceding section on models for the financial testing function, there are many different ways of organizing intake and managing a waiting list. This is true for any one program, never mind the myriad approaches that theoretically exist in looking across all three programs.

As with the preceding sections, the Working Group concluded that no one approach was to be preferred over any other – each CMSM would have to work this out in conjunction with all stakeholders. Accordingly, the purpose of this section is to:

- identify some of the key considerations involved in designing a system of intake and waiting list management, and
- put forward some suggestions and questions for discussion that ideally will be taking place among stakeholders within the geographic area of each CMSM.

Background and Assumptions

Section V ('Why Pathways Differ') pointed out how the fundamental differences in characteristics of the three programs have resulted in different approaches to intake and waiting list management. In one sense, the fact of LSR does not change the basic imperatives, i.e.,

- OW intake and waiting list management must take place almost in 'real time'.
- RGI housing waiting list management inevitably entails balancing the principles of access for clients in crisis, etc., with the principle of 'first come first served' as evidenced by the lengthy description of this function on pages 1 to 7 of the Companion Report.
- Child Care waiting list management involves similar balancing of priorities

between chronological wait lists and other considerations such as CAS referrals, LEAP, etc.

In another sense, LSR permits CMSMs to see the function in a new light -- as an opportunity to present a different type of 'front door' to people inquiring about human services in general. This front door could take shape in different ways, e.g.,

- in terms of the location and physical set-up of offices, front desks, etc.,
- in terms of promotional and explanatory literature and public advertising,
- in terms of telephone system features, and
- in terms of the breadth of expertise of staff taking initial calls.

However, there are some logical limits on just how new a light a CMSM can put on the situation. It is assumed that:

- the Ministry of Municipal Affairs and Housing will require CMSMs to adhere to the minimum requirements for co-ordinated access to all local social housing waiting lists through one organizational entity,
- there will be a move to reduce the number of co-ordinated access systems, i.e. matching CMSM geographic areas, and
- each CMSM will have the authority to decide what organizational arrangement to use (e.g. current provider-run configuration, new shared configuration with local providers and an individual CMSM, or make it entirely a CMSM internal function).

Similarly, it is assumed that there is a component to OW intake and screening that will be prescribed by MCSS as a mandatory set of activities that will be used for all CMSMs. In other words, all people actively pursuing OW financial assistance will find the experience of screening for financial eligibility to be essentially the same, regardless of their community of residence in Ontario.

With these assumptions as backdrops, CMSMs are confronted with different ways of designing their initial intake. Some design features pertain to physical set-up; some include the number of 'handoffs' a client would perceive they were experiencing; and others how much information staff would be able to provide clients along the way.

Physical Set-up for Serving Clients

Within this range of options are many of the same options considered by a number of CMSMs on the merits of co locating with HRDC (Human Resources Development Canada). A number of such co-locations have taken place, based on the similar employment objectives of all levels of government.

With the addition of RGI housing to its range of responsibilities, some CMSMs will likely study the relative merits of co-locating the housing-related functions with the employment-related functions. It should be remembered that co-location is a single term used to describe a variety of arrangements, such as:

- neighbouring (merely sharing space in the same building with no formal interaction of staff),
- co-habitation (clients see one reception area, display area, one reception desk),
- shared offices (in addition to co-habitation; there is shared training rooms, interview rooms, equipment, co-mingled offices),
- program partnering (as above, plus merged training activities, computer systems, word processing, mail delivery, advertising), and
- jointly re-engineered business processes (some managerial positions combined, such as office administrator, human resources, accounting, case management of clients in common).

In assessing the merits of co-location, two key considerations are:

- what the CMSM plans to do with the financial testing function for social housing (note the seven scenarios identified on page 44)
- what the plans are for financial testing for Child Care (four scenarios on page 45)

If the CMSM plans to take over the financial testing function for social housing, what are the merits, if any, of having the staff do this work co-located with staff performing OW financial testing? Would a broader mandate for such an office cause any loss of employment focus for the OW program? How would this be perceived by people in RGI housing who are working at low income jobs, or by seniors? Similarly, how would it look to working parents receiving subsidized child care?

Even if the CMSM decides to keep the financial testing for social housing and Child Care physically separate from Ontario Works offices, there is still the matter of deciding what the physical set-up for intake and waiting list management should look like. For RGI housing, are there merits to moving the staff running the unified access system into an existing CMSM office? If so, what type of office – one with an emphasis on OW, or one which is seen as a general inquiry centre for a range of municipal programs?

Obviously, the possibilities vary considerably depending on the size of the CMSM and the number of offices and sub-offices it uses. The model selected will be scrutinized by the community for messages it sends, intentionally or otherwise.

For social housing, 68 Co-ordinated Access Systems now exist province-wide as a requirement of the Ministry of Municipal Affairs and Housing. MMAH guidelines and directives for co-ordinated access are quite detailed, reflecting the need for fairness of access across a number of priority groups. The customer service benefits of adhering to these guidelines and directives are such that it is assumed MMAH will maintain existing expectations. However, it will be up to CMSMs to ensure that they are met.

The systems that exist today are the creations of social housing providers, resulting from local multilateral negotiations as to how they should be funded, where they should be located, what the forms should look like, how staff get hired, how the governing body should be selected, what the bylaws should contain, etc.

Co-ordinated access is funded out of the budgets of social housing providers. Since no new funding was provided for this function, it is financed by the savings that accrue through dealing with a reduced number of direct public inquiries and tenant application reviews.

Some CMSMs will undoubtedly wish to explore the possibility of co-location of the housing access function within CMSM offices. In doing so, some of the key considerations include:

- the perceived and possibly real loss of autonomy of the access system, even with a simple 'neighbouring' approach,
- the relative locational advantages of current housing access offices vs. CMSM offices,
- the type of CMSM office – one with a mandate as a 'general purpose' office or an OW emphasis, and
- financial savings through co-location
- the amount of 'walk in' activity and the different types of clients using the same front desk, waiting areas and interview rooms.

'The Virtual Office'

Many of the activities of intake and waiting list management do not require clients to attend an office in person. To the client speaking to staff on the phone or mailing in documentation, there are no visual clues that would suggest the staff person with whom they are dealing is affiliated with any other program. There is no mingling with clients of other programs. There is no clue as to the size of the organization or the other programs it may be administering.

To the extent a CMSM is able to run its operation on a 'virtual' basis, that is, by phone, mail, fax, etc. — it will be able to minimize concerns about stigmatizing individuals or making them feel uncomfortable. The CMSM will be able to set up offices in a wider variety of locations and physically group staff, with less concern about messages the configuration may send to clients. Multi-line phones could be set up such that an intake staff person responds knowledgeably on behalf of a number of program areas and seamlessly refers the client to the appropriate specialist.

A 'virtual' approach means, for example, that a unified access system for RGI housing, still operating under the authority of housing providers, could be linked to the CMSM in ways that enhance efficiency and customer service. In this scenario, a senior citizen calling the general public inquiry line of a CMSM to get on a housing waiting list could be seamlessly transferred to the unified access service. The 'virtual' approach may have particular appeal for rural and northern CMSMs.

A word of caution on the limits of the 'virtual' approach. A portion of the population served by all three programs will always need to see a worker face to face and will take time to find an office with a front desk they can attend to speak to a 'real person'.

Realistic Expectations of Intake Staff

'Intake' is a term that needs some definition. For purposes of this report, a high standard is set for the intake function: workers must be knowledgeable about a variety of human services programs and able to refer inquiries (either phone or face to face) to the right program area. An intake worker should know enough about a number of human services programs to be able to ask the inquirer the right questions – otherwise referrals are made to the wrong programs and everyone's time is wasted.

Generally speaking, there are two types of intake worker:

- the generalist, who fields initial public inquiries on behalf of a broad range of programs, and
- the specialist, who is expected to be fairly expert in one program area and therefore, must handle specific inquiries primarily related to that program, but who must also provide quality referrals to other programs.

As has been shown in the Companion Report, each of the three programs is complex and involves many different rules and procedures for intake staff to learn, not to mention keeping up with changes. Asking intake staff to become experts in a new program area and still maintain their old responsibilities will require concerted training, constant updating, and a carefully orchestrated implementation plan.

The constellation of program responsibilities for CMSMs has grown due to LSR. Many CMSMs will want to examine the intake function in a new light. As they do so, they may wish to consider some of the following activities:

- identify all the intake staff of the "Human Services" programs of the CMSM and agencies funded by the CMSM,
- examine the core competencies required and the training these staff each receive,
- develop basic information packages about the range of human services programs including the names and

numbers of contact people in each program and share them with all intake staff, and
- work out basic referral protocols with these human services programs and make sure they are shared with all who need to know them.

Approaches to Waiting List Management for Child Care

As has been mentioned, the waiting list function for OW financial assistance appears almost non-existent, i.e., there is virtually no waiting list given the nature of the service. For RGI housing and Child Care, however, waiting list management is a major activity, since both are rationed services with demand typically exceeding supply. This results in a number of similarities between these two programs. One notable difference is the amount of responsibility placed on the individual when their name comes to the top of the list:

- In RGI housing the person is notified of a vacancy and makes their own arrangements.
- In Child Care, the person is notified that they are at the top of the list for a subsidized space. In some CMSMs the person is directed to a particular child care centre, in others they are left to shop.

The local differences for Child Care appear to be based on different philosophies about the balance between helping parents obtain child care quickly and easily vs. promoting parental choice. The Ministry of Community and Social Services presently recognizes merit in both approaches and leaves the method chosen to CMSM discretion. However, it may be that one approach or the other has distinct advantages. This would appear to require a comparative research study.

XI. OVERALL SERVICE DELIVERY MODELS

In order to do this efficiently, ten of the key functions were identified and placed on a chart and three models were compiled.

Sections IX and X dealt respectively with the major elements needed to construct an overall delivery system:

- financial testing, and
- intake and waiting list management.

The purpose of section XI is to begin putting the bigger picture together and constructing some overall service delivery models. These models include some additional functions such as:

- disputes and appeals,
- overpayment recovery,
- risk assessment and monitoring (for existing clients), and
- handling suspected fraud.

Naturally, as more functions are added, the number of possible combinations regarding which organization does which function, grows rapidly. Each CMSM will have to determine the number of models it wishes to explore with the various stakeholder groups as it works towards its ultimate selection.

Due to the increased number of functions and the desirability of being able to easily compare and contrast different approaches, a tabular approach to presenting models was chosen. A table permits 'side by side' comparisons and facilitates discussion among local stakeholders.

As outlined in section VII and VIII, the CMSM is assumed to carry on with its traditional role of directly performing all OW functions and is further assumed to be taking on all functions for Child Care. This simplifies the situation, but still entails a two stage process conceptually. First, it means constructing overall delivery scenarios for social housing and assessing their relative merits for that particular program. Secondly, it involves considering whether or not those merits are influenced by the fact that CMSMs are likely performing some very similar functions for OW and Child Care.

The social housing scenarios are described in the table on page 52. The headings on the left side of the table are cryptically described and refer to the following:

1. Information: provide information re: eligibility, application process, waiting list, etc.
2. Intake and Screening: determine basic eligibility, distribute/receive application forms; focus on type of unit required.
3. Waiting List Management: establish client identifier, maintain list, track applications, update information, refer applicants to vacant units.
4. Eligibility: confirm legal resident status, no arrears, need level.
5. Income determination at placement: full and complete application, including income information, must be filed before tenant placement.
6. Income verification (in situ tenants): determine frequency of income verification and verify income of all household members.
7. Disputes & appeals: possibly mandated to conduct appeals.
8. Recovery of Overpayments and Arrears: establish amount, determine repayment schedule and collect.
9. Misrepresentation of Income: disqualify client for RGI benefits.

For a fuller definition of each function, please refer to the Companion Report.

In all cases, the social housing provider is assumed to be responsible for tenant selection and placement, finalizing charges, calculating rents, entering into lease/ occupancy agreements, withdrawing subsidy when file is incomplete, collecting rents. As a result, these functions do not appear on the charts.

Needless to say, the construction of overall service delivery models by each CMSM for discussion with local stakeholders and ultimate presentation to municipal Councils will likely be a labour intensive set of activities involving many stakeholders in each community.

Given this situation, the Working Group concluded that their report has, at this point, done what it can to 'set the stage' for local planning activity to take place. To attempt to outline further variations on the forgoing models would likely contradict one of the Working Group's main conclusions, namely that it is up to each CMSM to:

- determine which optional models to assess,
- develop its own criteria for assessing each option, as well as the relative importance of each criterion, and
- assess which model is preferable.

As the service system manager each CMSM will not only be responsible for these steps, it will have to determine what process it will follow to engage all the other stakeholders, including users of service.

Note: Insert Chart here: Alternative Delivery Models for Social Housing Financial Testing

ALTERNATIVE DELIVERY MODELS FOR SOCIAL HOUSING FINANCIAL TESTING

Function	Model 1:	Model 2:	Model 3:
Summary of Model	Client continues to deal with CAC/provider; CMSM assumes audit/accountability functions over provider operations	Client provides information to provider who acts as conduit to CMSM operations	Client deals with CMSM for all RGI purposes
Information	CMSMs, providers and CAC act as information sources	CMSM, providers and CAC act as information sources	all inquiries referred to CMSM who act as sole source of information
Intake and Screening	Providers and CACs assist applicants complete forms; CACs determine eligibility, type of unit; CMSM supervises and audits function	Providers assist applicants and forward completed application to CMSM who determines eligibility and type of unit required	all inquiries to providers referred to CMSM who handles all applications and determines eligibility and unit type required
Waiting List Management	CAC manages common waiting list; providers able to access own list; CMSM receives performance reports and may perform audits	CMSM manages common waiting list; providers able to access own list	CMSM manages common waiting list; providers able to access own list
Eligibility	CAC establishes initial eligibility; provider has similar role at placement; CMSM supervises and may audit	CMSM establishes eligibility at application and placement stage; provider may supply information	CMSM establishes eligibility at application and placement stage; provider may supply information
Income determination at placement	CAC passes on application to provider who ensures income information is updated; applicant and provider finalize rent, including utilities	CMSM collects and verifies income and refers applicant to vacant units; applicant and provider finalize rent, including utilities	CMSM collects and verifies income and refers applicant to vacant units; applicant and provider finalize rent, including utilities
Income verification for in situ residents	Provider updates income and rent; CMSM able to audit	provider collects information and passes on to CMSM who undertakes verification	CMSM collects and verifies income from residents
Disputes and appeals	Providers required to have internal appeal process	CMSM has internal appeal process. Provider may have standing.	CMSM has internal appeal process. Provider has no role.
Recovery of Overpayments and Arrears	Provider responsibility	CMSM determines amount, provider recovers	CMSM responsibility
Misrepresentation of income	Providers may evict for misrepresentation or non-payment	CMSM may withdraw subsidy; provider may evict for non-payment	CMSM may withdraw subsidy; provider may evict for non-payment

PART C – DEVELOPING RECOMMENDATIONS

Part B looked at 'the big picture' to see the various ways each of the business processes in the three programs can be fit together to make an overall service system which reflects local conditions.

Part C of the report puts forward a number of recommendations to improve specific business processes. These were derived largely from a study of the Companion Report, put out for consultation and are now reported here as final recommendations.

I. COMPANION REPORT AS A SOURCE OF RECOMMENDATIONS

As noted in Part A, Section V (Approach to the Work) the three programs have existed in relative isolation and no one can lay claim to being an 'across-the-board' expert. Yet, as LSR implementation proceeds, CMSMs need to have broad expertise resident within their organizations.

For this reason, there was practical utility in compiling, probably for the first time ever in one document, a detailed description of all the basic business processes for all three programs. Since the program rules play such a big part in shaping the business processes, they were included as well.

The resulting document, which contains the description of program rules and some forty major business processes, consists of 60 pages of legal size text. Therefore, the description has been bound separately as a companion to this report. This separate document should be of use, not only to staff of CMSMs, but also to providers of social housing and child care as discussions and planning activities take place locally.

The title of the Companion Report is "A Description of Business Processes – Joint Municipal/Provincial Companion Report to the Report of the Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing."

Apart from its potential use over time, the descriptive document has already proven helpful, since it permits a systematic comparison of each process in each program. This was a significant step for the Working Group in terms of arriving at recommendations. Whenever a comparison showed a difference in processes between programs, the next step was to look for the corresponding eligibility rules to see if they would explain the difference in the processes. As mentioned previously, the three programs have different objectives, resulting in different rules and hence different business processes.

However, there were a number of instances in which there were inexplicable differences; for example, the process did not exist in one program or the processes were different, despite similar program rules. Such observations typically pointed to a recommendation, either to create or to modify a given business process.

In compiling the business processes for the Companion Report, the Working Group began with the Ontario Works Directives, as they were the most recently revised, and were the most standardized throughout the province. Moreover, since the rules and consequent number of business processes for Ontario Works are the most elaborate, this practical approach provided a comprehensive listing of topics for comparison purposes.

This method is not intended to signal that one program's approach to financial testing should be imposed elsewhere. The business processes in the Child Care and RGI programs often varied from provider to provider across the province. Business processes in these two programs have only been reported where it is known or believed to be common practice throughout the province.

Unfortunately, space did not allow reporting of many of the innovative systems and business practices which have been developed in many communities. CMSMs are encouraged to document processes developed by providers locally.

Where the processes were similar but were typically being performed across a number of organizations, the operative question was often whether or not the CMSM should consider combining them. Since such changes appeared to involve significant shifts in mandate for organizations, it was felt that such questions should not be addressed for each business process in isolation. Rather, the possible merging of functions across programs is contemplated in Part B - Service Delivery Models.

The recommendations are shown in the following format, for the most part:

1. name of business process/topic
2. the recommendation
3. analysis and discussion
4. highlights from the consultations
5. design principles that are relevant to the recommendation

In studying each recommendation, it may be useful to also review the relevant background information contained in the Companion Report. To that end, the relevant page number in the Companion Report is cross-referenced for each business process.

The points made under the heading 'Analysis and Discussion' are intended to reflect the highlights of the Working Group discussions and the consultation sessions. In the interests of brevity, only those business processes with a recommendation for change are included.

II. RELATIVE EMPHASIS OF RECOMMENDATIONS ON SOCIAL HOUSING

A perusal of the recommendations in this part of the report indicates a disproportionate number pertaining to social housing, as opposed to Child Care or Ontario Works.

The explanation for this emphasis lies primarily in the nature of the Local Services Realignment shifts that are taking place. In summary:

- Ontario Works continues to be a municipally delivered cost shared program
- Child care continues to be municipally delivered and cost shared, albeit with a more comprehensive role for CMSMs as service system managers
- Social housing is changing from a program administered by the province with a very small municipal role, to a municipally administered program and significant municipal funding

The extent of change in social housing is the most profound, yet implementation is farther along in the other two programs. As a result, there are more issues yet to be addressed in social housing – hence more potential recommendations.

III. SUGGESTED TIME FRAME FOR RECOMMENDATIONS

At the end of each recommendation, one of the following appears: (short term), (medium term), or (long term). This is intended to provide a rough time frame, within which the recommendation, if accepted, should be implemented. For purposes of this report;

- short term means within the next 12 to 18 months,
- medium term is between one year or so and within three years, and
- long term is more than three years.

These are estimates, of course, since no precise work plan was developed for any recommendation. The estimates should, however, give some sense of what is feasible or appropriate to achieve sooner rather than later.

The balance of this part of the report covers each of the business processes with a recommendation for change. Each recommendation is accompanied by the service principle(s) which seems most relevant.

IV. RESPONSIBILITY FOR IMPLEMENTING RECOMMENDATIONS

As stated in the introduction, the recommendations are wide ranging and are intended primarily to be useful advice for program staff and decision-makers in both municipal and provincial governments. No attempt has been made to develop an implementation plan other than to identify an approximate time frame for activity.

The report is a public document that in no way is intended to be official policy of either CMSMs or the province. The presumption is that all the interested stakeholder organizations will want to consider the report and determine what position they will take on any given recommendation. Responsibility centres will be determined as a natural outcome of this process.

V. RECOMMENDATIONS

1. Decision Making Principles

Recommendation #1

That each CMSM involve its own staff and all stakeholders in order to develop a vision statement and design and delivery principles for the three programs.

ANALYSIS AND DISCUSSION

The Working Group found the self-imposed task of developing its own vision statement and design and delivery principles to be a galvanizing exercise. Naturally, there is no precise 'right or wrong' statement of vision and principles – the important point is that it requires discipline and an appreciation of the views of others in order to reach a consensus.

It is acknowledged that many municipalities have invested in strategic management for social services. In their new role as CMSMs, they will be reviewing their mandates, visions and strategic objectives. It was felt that such activities would prove useful if they were considered an integral part of the work of each CMSM as it studies the three programs.

(See page 50 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

There was support across the province for this recommendation.

2. Policy Consistency

Recommendation #2

2.1 That a review of all financial testing rules be undertaken across the three programs, to ensure that all rules are as compatible as possible, given the differences in program objectives. (short term)

2.2 That the review team for this activity include both provincial and municipal policy and program staff, each with a background in one or more of the three programs, seeking the advice of social housing and child care providers in a meaningful way. (short term)

2.3 That the Companion Report be considered a key reference document for this review. (short term)

ANALYSIS AND DISCUSSION

Part A, Section III of this report identified the distinct objectives of each of the three programs. The program and policy rules for each program are a logical extension of differing program objectives in most cases. However, in compiling the program descriptions for the Companion Report, there were a number of differences in rules which did not necessarily appear to relate to different objectives. For example, student loans, lottery winnings and tax credits are treated differently.

It was beyond the mandate of the Working Group to identify and recommend changes in program rules (regulations and directives). This work would extend to exploring differences in definitions and standards across the three programs as well. For instance, "income" may have a common definition, however, the level of income allowed may be applied differently from one program to the next in order to accommodate different program objectives. It would appear that this is a significant area of work that needs to be undertaken by a team of program experts.

CONSULTATION HIGHLIGHTS

Participants supported the recommendation, but also emphasized that each of the three programs has different objectives and philosophies, and that the uniqueness of each should not be lost in the attempt to gain efficiencies.

3. Standardized Forms

Recommendation #3
That a Working Group of CMSM and provincial staff representing all three programs make specific recommendations as to the forms which should be revised to achieve efficiencies and better service. This Working Group should include the advice of social housing and child care providers. (short term)

ANALYSIS AND DISCUSSION

There are many different forms used across the three programs. If properly designed, whether electronic or paper, forms can be a key determinant of how much staff time is required to perform a given function. Given the overlap of clients in the three programs and the commonality in the types of information gathered, there may be significant potential for streamlining. This is premised partly on the use of a common client identifier (recommendation # 4) and the portability of client information from one program area to another (recommendation # 5), while following the necessary protocols designed to protect privacy.

However, forms and computer systems impact on each other. For Child Care fee subsidies and RGI housing, there is no one computer system across the province. As a result, many different local customized forms have been developed over the years. (Even in Ontario Works, which is close to one system, there are many different 'bootleg' forms in existence.) Notwithstanding, the extent to which one can move towards standard forms depends greatly on the number of different computer systems in use.

There is a commonly held belief that it is possible to have one uniform application form serve all three programs. This is premised on the common types of information typically gathered at the very outset of an application-name, address, date of birth, etc.

However, the different program objectives and rules take over quickly after the initial 'tombstone' information has been obtained. This is due to the different program rules and definitions. For example, something as basic as 'income' is defined differently in all three programs. Within that category, 'earnings' are not treated identically, e.g. gross vs. net. The benefit unit is not the same in the three programs. In fact, social housing has to consider the income of all people residing in the dwelling unit for purposes of calculating rents owing in respect of each of the adults present, while the other two programs use the concept of a benefit unit, including spousal relationships.

Even if the rules were identical across the three programs, this would not necessarily mean that one common set of forms would be easy to develop, although the task would certainly be a feasible one. This is because there may not be a common view of what purpose forms (either electronic or paper) are intended to do vis-a-vis client responsibility. Should the client be told in general terms, backed up with a few common examples, what the term 'liquid asset' means and then left to tell the intake staff person what liquid assets they have? Or should the application form provide many different cells with separate headings of most types of liquid assets to act as the script for a series of verbal prompts to the client? The first approach places a greater onus on the client to understand the general concept and rely on memory. The second may be more time consuming but may yield more thorough results, which stand up better upon appeal.

On balance, the Working Group saw merit in exploring the possible benefits of a common 'page one' on the financial testing forms for all three programs. This page could gather the basic personal information and have spaces for the common client identifier fields for each family member (see recommendation # 4)

Other types of forms are quite similar and a move to uniformity may prove beneficial. One example is the 'Consent To Inspect Assets' form. If the same form were used in all three programs, this would increase its recognition factor within lending institutions and may facilitate co-operation. Another example is the questionnaire form used in social assistance to determine spousal status (assuming total consistency in this particular definition and how it is administered is an objective).

Based on this assessment of the situation, there appears to be enough potential benefits in the area of uniformity and/or consistency in forms to merit a thorough review by provincial and CMSM program staff representing the three programs. It should be remembered, however, that there are practical limits to what can be achieved in this area.

CONSULTATION HIGHLIGHTS

There was widespread agreement across the province on this recommendation, except where participants felt the technology must come first.

PRINCIPLES

- existing information is used whenever possible
- whenever possible activities are carried out only once
- the service system responds quickly to changes in the client's financial status
- clients are informed about how their personal information will be shared

4. Common Client Identifier

Recommendation #4
That a unique client identifier be assigned to any individual who is benefiting directly or indirectly (i.e. as a spouse, dependent adult or dependent child) from RGI subsidies or Child Care fee subsidies or Ontario Works financial assistance. (medium term) CC&RGI (long term)

ANALYSIS AND DISCUSSION

A hallmark of efficient customer service is to reduce duplication wherever possible. This means being able to input, access, and change information quickly and easily. Our consumer-based society now makes extensive use of PINs to efficiently access financial information, make purchases, etc.

Having one common client identifier is an important prerequisite to achieving efficiencies in human services as well. For example, it would seem efficient if clients only had to provide new information to one program and then see it being used to update their file in another program. For this to happen, it is crucial to be sure that 'Jane Doe' in program 'A' is really the same person known in program 'B' as 'Jane Doe'. This can best be assured by having all three programs use the same client identifier.

Since this would make data matching across the three programs much easier, it is also important to be sure that the necessary protections of privacy are built in. For example, regular data matching protocols across two or more programs would have to use only the client identifier to look for matches. No personally identifying information would be exchanged as part of such matching activities. It is only when the person is unmistakably confirmed as being on both data bases that any personally identifying information would be exchanged.

With this type of caveat, the Working Group saw the importance of moving to one common client identifier for all three programs -- a 'human services' identifier or 'community services' identifier. This is analogous to the approach used in the health sector in which one identifier has utility for a range of related programs with significant overlaps in users. The same approach may have emerging applicability in other sectors, such as education.

Assuming there was a move to one client identifier for the three programs, the question arises, what sort of number should be used? Also, is there an existing number that could be used, or should one start 'from scratch'?

Of the three program areas, only Ontario Works comes close to using one common client identifier across all CMSMs. It is approaching universality at present, and with the overhaul of the system underway (see Part A Section VII), there will presumably be only one client identifier for all of social assistance. For the Child Care fee subsidy system under development, there would appear to be no impediment to using a client identifier that is identical to social assistance. Given there are no plans for one overall information system for social housing, the question of a common client identifier may seem purely hypothetical.

However, the Working Group saw considerable merit in recommending that all three programs have a long term goal of one common client identifier, even if it may take years to achieve. Given the imminent work on the Ontario Works and Child Care information systems, these two areas should agree on a common format for assigning client identifiers.

One related comment when it comes to the format for identifiers: there is an emerging trend to assign a separate client identifier to each member of a family or benefit unit. This permits total certainty about properly identifying people and the maximum flexibility in terms of tracking the members of a benefit unit. For RGI subsidies this would mean a unique identifier for each person whose name is on the lease as well as any of their dependants. For Child Care and Ontario Works, this means each person in the benefit unit. (See page 10 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

In addition to supporting the recommendation, there was some enthusiasm among participants for the use of a "smart card", with the proviso that it be rolled out for other programs first so that there is no stigma attached.

5. Strategies To Improve

Recommendation #5

That a working group of staff from CMSMs and the province representing all three programs, plus social housing provider representatives examine:

5.1 the feasibility of developing one information system for purposes of capturing tenant financial information, calculating and administering rents, etc.

5.2 the nature and extent of connectivity and information sharing that should exist between the Child Care fee system and the social assistance information system

5.3 how technology will deliver a simple, seamless interface at a single workstation which staff can use in the delivery of a variety of programs sought in the long term (short term)

DISCUSSION AND ANALYSIS

Section VII of Part A discussed the reforms in major business processes already well underway, particularly the Service Manager's Module for Child Care and the overhaul of social assistance business processes. There was no concerted activity underway in social housing which could be described as province-wide in scope.

The work underway is complex and far-reaching within both Child Care and social assistance and both are expected to yield significant improvements. Each has its own time lines and deliverables and is aware of the likely need to link in some fashion. However, the time and energies of staff have, until now, understandably been devoted primarily to the independent programs, rather than the long term vision of the next generation of integrated information systems.

Now that RGI housing has been added to the CMSM mandate, there is merit in beginning to study the long range systems possibilities in a scenario in which the major systems reforms of Child Care and social assistance are in place. This type of work would be based on a vision of a human services information system involving concepts such as one client identifier and client consent to information exchange.

It could also include the possibility of a system which could capture tenant financial information, calculate rents including adjustments for amenities, generate rental notices, etc. Although such a system is difficult to achieve among some 1200 providers, each with their own approach, it is nevertheless worth examination as a long term concept.

During the course of its consultation, the need to make optimum use of technology was repeatedly mentioned. In particular, the need to ultimately have each workstation equipped with all the required functionality on one screen and one keyboard for multiple programs was identified and widely supported. In the North this point was especially topical.

It should be noted that, in this context, 'multiple programs' means more than the provincially mandated ones. It is also meant to include local programs and features.

At one of the consultation sessions, the group developed a recommendation along these lines:

> "That there be one database provincially developed that would accommodate the needs of all three programs. It would need to recognize the diversity of the CMSMs and allow flexibility within the system. This should build on existing systems such as BTP on the current OWT/CWT database."

Whether there are three linked systems behind the one screen (with some sort of switching mechanism to change from one program to another) or whether there is only one integrated system behind the screen, was not the point. The key point was the need for a fast, seamless, simple interface for workers serving clients across a range of programs.

The above recommendation refers to building on existing systems. The Working Group did not feel it was within its mandate to determine which parts of which systems should be built upon. However, the ultimate goal of all three programs being seamlessly accommodated was fully endorsed.

(See page 58 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

This recommendation received general support. Participants noted that gathering information about income sources is the most time consuming process, not the rent or eligibility calculation. Therefore, technology will never be a panacea for all problems. The time line for this recommendation was also questioned; it was thought that it should be long term.

6. Privacy Requirements And Information Sharing

Recommendation # 6

6.1 That the unique client identifier (recommendation # 4) be used to facilitate information exchanged across the three programs with respect to people residing within a CMSM who have applied for, or are using more than one of the three programs. (long term)

6.2 That applicants for any of the three programs be required, as part of the application process, to sign a consent to the release of personal information to the deliverer of either of the other two programs, in the event they apply for one or both of them. (short term)

6.3 That legislation governing Child Care and RGI housing include a section similar to Ontario Works (section 41) to the effect that 'personal information collected by a delivery agent may be used only for the purpose for which it was collected or for a consistent purpose'. (short term)

6.4 That the collection, use and disclosure of information for purposes of determining eligibility and calculating subsidies and assistance for all three programs be determined as all being for the same 'consistent purpose'. (short term)

6.5 That, for all three programs, consent be obtained from applicants, for the release of information to any other CMSM, ministry, federal or provincial government or any of its agencies for the purposes of administering social benefits. (short term)

ANALYSIS AND DISCUSSION

As discussed in Part A Section VIII -- Information Use and Disclosure -- fair information practices include:

- limiting the collection and use of personal data to that required by law,
- specifying the reasons for collecting data,
- obtaining informed client consent,
- being open about information practices, and
- ensuring the holders of data are accountable.

At present, client information flows across the three program areas are relatively limited and are essentially triggered by the client:

- Whenever a person in an RGI unit declares their income as including social assistance, they are asked to provide some proof of this, such as a copy of a cheque stub and drug card which lists beneficiaries.
- Whenever a person applying for a Child Care fee subsidy declares their income as including social assistance, the same type of proof is sought.

As CMSMs assume their new roles for the three programs, the programs have potential to be seen in a new light, i.e., as social benefits being administered for a consistent purpose, namely the efficient provision of monthly subsidies according to a person's changing financial and personal circumstances.

Many individuals receive subsidies from more than one program at a point in time. Over time, an even greater proportion of users access more than one program. In order to efficiently keep track, in 'real time', of these changing personal circumstances, movement of this information across the three programs would result in subsidies which are more accurate and timely. Given that the great majority of users of these programs are in very low-income situations, it is very important that they receive the right amount of subsidy at the right time.

As a concrete example, many people find they are cycling in and out of the labour force and Ontario Works. A system in which a person reports their fluctuating earnings only once each month to one organization and automatically receives a more accurate subsidy for other government funded programs as well, would achieve a very high level of customer service and taxpayer support as well.

Achieving this level of client service and taxpayer support does not mean all information about all people receiving subsidies from any of the three programs will automatically be shared among all CMSMs and social housing providers. Information about a given person would only move from one organization to another under defined circumstances and in a controlled manner.

This means using a common client identifier as a key safeguard to be sure that client #12345 in program A is the same person using program B, before any information is exchanged.

It also means explaining to client #12345 when they first apply for program A, that information about their financial and personal circumstances they provide to program A, can be shared with program B, should they apply for it as well at some future date. It also means explaining what types of information will not be released (e.g. health information). Finally, it means obtaining the person's informed consent to such information sharing.

Administrative safeguards would be needed too. For example, information would only be exchanged if a match of client identifiers on the information systems of both program A and B occurs. It would be up to the providers to work out the protocols, whether one gives the other a list of client identifiers for a given month, or whether they exchange such lists.

Whenever a match is found, the organization finding the match would request and receive only the type of information about the client to which they were entitled. Furthermore, information would not automatically be moved into the database of the 'receiving' organization. It would have to be reviewed by program staff and some judgment or investigation would have to take place, before it was accepted.

The type of information received would be necessary to administer the governing legislation; otherwise it would be safeguarded. A written agreement between the providers would specify what kind of information would be exchanged, how, and what safeguards would be in place.

It is fair to say, given the varying state of computer systems among the three programs, that province-wide information sharing agreements are not expected for some time. However, the legislative framework can be put in place with a view to the future. Some CMSMs may wish to enter into localized agreements. As a result, the Working Group saw the need for a number of recommendations to lay the foundation for the future.

It would be an incomplete discussion if the issues of information use and disclosure were restricted to the three programs. Information exists elsewhere that would be useful in verifying income and other personal circumstances, e.g., income tax information.

Assuming that the kinds of protection measures described above are considered standard procedure, such as written information agreements, it is reasonable to expect applicants to consent to the release of information for defined purposes. Once again, the intended result is more timely and accurate subsidies.

It is recognized that legislation changes are likely required to implement significant changes of this nature. As part of the change process, review by the office of the Information and Privacy Commissioner is expected to be an important step.

(See page 57 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

On balance, this recommendation was supported, but with a number of qualifiers - principally that the security of confidential information can never be compromised.

7. Capacity To Share Client Data And Common Linkages

Recommendation #7

7.1 That, when a person is receiving subsidies from more than one program, their information updates be posted separately to each program's data base. (medium term)

7.2 That CMSMs and social housing providers consider developing a local system of notifying each other of changes in status of clients served in common, consistent with information sharing requirements. (short term)

ANALYSIS AND DISCUSSION

The construction and use of a common client identifier is considered fundamental if personal client information is to be shared efficiently and safely across the three programs. At the same time, it should be regarded as a powerful tool which could lead to data exchanges which are inappropriate, and must be prevented by safeguards.

One of the benefits of the common identifier is the capacity for a client to provide updated information to one program and have the information used to update their file in another program. This updating can be done by either:

- having the computer system of each program search for and access the new information from a common data file containing the new information, or
- using the new information to separately update the databases of the two programs (called separate posting).

The separate posting method provides the greater degree of privacy protection.

The Working Group also examined several other possibilities involving common linkages of information. These pertained to automatic paper notices that could be generated and sent to the provider of another program that they might want to do some follow up work.

If there were electronic information exchange along the lines recommended as a long term vision, then paper notices would not be necessary. Circumstances that could be useful for paper notices include the following (assuming client consents to exchange information are revised to include all three programs):

- A person leaves Ontario Works for reasons related to earnings or change in spousal status. This would generate a notice to staff in the same CMSM administering Child Care fee subsidies, of the client identifiers of those who had left Ontario Works. This would permit a prompt review to see if Child Care fee subsidies should be adjusted or removed entirely.
- A person leaves Ontario Works and was on OW's record as living in a certain RGI building. An automatic notice could be generated to that provider to say the person was no longer participating in Ontario Works. The provider could then review to see if a rent change was in order.

Such notices are likely not the type that would be generated by a province wide system. Rather, it would be up to local arrangements within CMSMs and between CMSMs and providers of social housing.

(See page 58 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

There was general support for this recommendation. Concerns were expressed regarding: how information is posted and shared, practicality, safeguards, workload issues, and province-wide technology.

PRINCIPLES

- rules are applied in accordance with provincial legislation and directives, including laws governing privacy
- clients are fully informed about how their personal information will be shared before being asked for their consent to the release of information
- decisions can be appealed to/reviewed by someone other than the person who made the original decision
- clients are informed of their right to an appeal/review

8. Dispute Resolution/Appeals

Recommendation #8
That, for Child Care and social housing, the province set minimum standards for CMSMs and service providers to follow in terms of timing, scope and due process requirements for internal reviews for clients who are not satisfied with a decision.

ANALYSIS AND DISCUSSION

As the Companion Report indicates, social assistance legislation now contains a very prescriptive process for internal reviews of decisions in clearly defined circumstances. This process is a prerequisite for any person who wishes to appeal to the Social Benefits Tribunal (SBT).

For Child Care, the province suggests each CMSM should establish and communicate their own internal policy regarding complaint and appeal processes. There is no equivalent to the SBT for Child Care decisions.

For RGI units, MMAH has required providers who enter into Operating Agreements to have an independent appeal process (persons reviewing are in higher authority and were not part of the original decision). Non-profit providers under the Federal-Provincial Non-Profit housing Program do not have this requirement. There is no SBT equivalent. Recourse for those wishing to pursue a matter further would be to the Ombudsman, in the case of provincially administered units (pending transfer to CMSMs at which point the Ombudsman no longer has jurisdiction). In other types of units, judicial review would be the usual next step after an internal review.

The differences in approach across the three programs can be problematic in cases where the issue being appealed is identical. The most common examples are whether or not there is a co-habitant (spouse) present and whether income such as earnings were realized, but not reported. It is difficult to reconcile a review of client circumstances in one program leading to the conclusion that there is no co-habitant present, while another review in a second program area leads to the conclusion that the same client does have a co-habitant (spouse) present!

Meanwhile it is one organization -- the CMSM -- that is the common element that would be in the position of having to explain the different findings. If these particular types of issues could be identified and the SBT had ultimate jurisdiction for only these issues for all three programs, such situations would be prevented.

At the same time, there is some reluctance to extend the review powers of the SBT into new areas. For one thing, it is not clear where to draw the line on the expanded scope of the SBT. The Child Care needs test allows considerable discretion, especially in terms of items that may or not be recognized as expenses. Would this mean each CMSM would have to clearly document all its policies on the use of discretion with a view to them possibly being the topic of a tribunal hearing? What would this mean for the expertise required of tribunal members? Would they need to know in detail all local policies about the use of discretion? Or would they only need to consider whether the written policies were fairly applied?

Although the scope of these questions pertains only to the determination of the amount of the fee subsidy or the rent owed, there is also the matter of fair treatment in terms of access to the limited number of fee subsidies or housing units. Could the SBT authority be extended to financial eligibility questions without also extending it to disputes relating to access to limited spaces?

Given the nature of these questions, the Working Group did not make any recommendations in its draft report. Rather, it put out the following questions for consultation:

- Should the Social Benefits Tribunal have any jurisdiction in Child Care or social housing? If so, for which types of decisions?
- Should the internal review processes for Child Care fee subsidies or RGI housing be subject to provincial rules and time frames as in Ontario Works?
- Should there be any changes to internal reviews/appeals for Child Care or RGI housing? Or, should there be just more requirements to clearly document the internal procedures and explain them to

clients who may be unsatisfied with a decision?

(See page 33 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

On balance, most of the discussion at the consultation sessions seemed to be in favour of not extending the jurisdiction of the Social Benefits Tribunal to new programs. However, a minority did feel it would be appropriate, provided the jurisdiction was limited to the kind of issues of fact, similar to those arising in Ontario Works (e.g. earnings not reported, presence of spouse not reported).

The general sentiment was that the province should only go so far as setting time lines and basic standards for internal reviews for both Child Care and social housing, to which all providers must adhere. Beyond the basic province-wide minimum standards, each CMSM should design its own processes and requirements for service deliverers. The closeness of local government was frequently cited as an important 'check and balance' to ensure disputes receive fair consideration at nominal cost.

PRINCIPLES

- all relevant client information is obtained and verified
- financial information is updated in a timely fashion
- rules are applied in accordance with provincial legislation and directives, including laws governing privacy

9. Verification Processes

Recommendation #9

9.1 That a Verification Procedures Review Group, consisting of provincial and municipal staff from all three program areas, (including the advice of social housing and child care providers) be formed to determine the optimum type of reviews and risk factors to use in triggering verification reviews in each of the programs, including identifying opportunities for business processes that can be efficiently applied across all three programs. (medium term)

9.2 That CMSMs consider the opportunities that may be available by creating a form of internal program audit unit, to conduct random as well as regular reviews of the accuracy and efficiency of the verification function in each of the three program areas. (medium term)

ANALYSIS AND DISCUSSION

Organizations today, whether in the public or private sector, make extensive use of independent reviews of their basic business processes to ensure they are as efficient as possible as they go about fulfilling their mandates. The degree of independence in such reviews varies from a dedicated part of the organization (a form of internal audit function) to a completely outside firm. In some cases, an organization will seek out an independent review; in other cases it is a requirement of customers or suppliers.

The common element is the constant search to do things better, not to find mistakes and attribute blame. It is in this spirit that the Working Group turned its attention to the question: How does one know that eligibility for the three programs is being thoroughly and efficiently verified?

This is an extremely difficult question to answer. For single parents about to be transferred from the former Family Benefits program to Ontario Works, much time and effort has gone into searching for the optimum cycle and type of review that is needed to provide a reasonable level of assurance that only eligible clients are receiving the proper amount of assistance. This approach has been applied by the Ministry of Community and Social Services to a significant number of cases and it is now being adapted and tested for CMSMs to use in Ontario Works. It is known as CVP – the Consolidated Verification Process.

The approach has essentially changed the focus of case monitoring from a time basis (e.g. review 'employable' cases every three months) to a system based on risk factors derived from actual experience with different case situations. This system is coupled with random case reviews, which the Working Group also supported.

The principles underlying this approach appear to have applicability to all three programs and the sources of information and the tools and techniques to verify accuracy are often identical e.g. income tax authorities, employers, credit bureau, etc. This points to the utility of a group being formed to develop standards for verification that have broad applicability across the province. The standards would have to recognize the need for some flexibility in their application, given the different characteristics of each CMSM.

Such a group would develop practical standards. However, when it comes to being sure the standards are being followed, another type of verification is required i.e. an independent periodic review involving a sample of cases to see that procedures were followed and an acceptable level of accuracy has been achieved. With an expanded mandate in financially tested programs, CMSMs may wish to scrutinize their internal review capacity. For example, there may be an opportunity to create a unit dedicated to performing reviews of the verification activity and accuracy across all three programs, regardless of the type of organization doing the financial test.

CONSULTATION HIGHLIGHTS

9.1 General agreement with some diverse opinion as to who should be at the table, consistency and flexibility. One area noted that delivery in the North does not allow for the level of expertise required in all three programs by one worker.

9.2 Agreement noting that CMSMs must determine staffing based on size for this function, develop links to provincial audit resources, and take into consideration audit functions already in place in CMSMs.

PRINCIPLE

Clients are informed of other types of financial assistance and services for which they may be eligible and which may be appropriate for them.

10. Pursuing Other Income And Assignments - Realizing Resources Available

Recommendation #10

That the review of financial testing rules (recommendation #2) consider whether or not the financial testing authority for RGI housing or Child Care fee subsidies should include unrealized resources which might reasonably be available to a person, e.g., child support, support from sponsors of immigrants, employment insurance, etc. (short term)

ANALYSIS AND DISCUSSION

Providing "excellent service to clients" as stated in the Vision Statement (Part B, Section I) was of primary importance to the

Working Group in formulating the recommendations to this report. An underlying principle in human services is to encourage and support independence and individual self-sufficiency wherever possible. Pursuing available income is a fundamental eligibility requirement in the Ontario Works program. Although the participant will not see an increase in their monthly entitlement once they have secured this other income, the client will have the full benefit of this other income once they are off the social assistance system. Although the social housing and Child Care programs are not legislatively permitted to require the client to pursue other income, many service deliverers recognize the benefit to the client of pursuing these resources and supply them with referrals and information to do so. The most common situations include potential child support and assistance from sponsors of immigrants.

As in the following discussion on agreement to reimburse, there is a well-established expectation in social assistance that clients' financial circumstances include not only the income they actually receive but also funds they may be able to receive (resources available).

In calculating Child Care fee subsidies, many CMSMs make use of the in-house expertise they have in the form of social assistance Family Support Workers to ensure subsidized single parents are pursuing child support. Activity in the area of considering sponsors to be an available resource seems to be more limited.

In RGI housing, the financial test considers only payments actually received, as opposed to having tenants/members pursue resources or deeming income to have been received in the event they do not pursue such resources.

The principles of horizontal equity and ability to pay are certainly factors here as well. On balance, the Working Group saw the issues surrounding available resources as matters for those reviewing financial testing rules. (See page 31 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

This recommendation received support with the following additions: a proper infrastructure must be in place, expectations regarding the requirements to pursue support need to be articulated, the differences in the three programs must be recognized, and there must be consistency of application across all three programs.

11. Pursuing Other Income And Assignments - Agreement To Reimburse

Analysis and **Recommendation #11**
That the review of financial testing rules (recommendation #2) consider whether or not the financial testing authority for RGI housing or Child Care fee subsidies should include the ability to require a person to repay subsidies in the event the person realizes income in the future that pertains to the time period they were receiving subsidy. (short term)

DISCUSSION

The concept of 'agreement to reimburse' is well-established in social assistance programs. The basic premise is that, while social assistance can provide help based on a person's need today, should the person subsequently receive money from some other source, and should that money cover the same time period, then social assistance should be paid back. The detailed description of rules and business processes indicates that, while there is such an expectation in Ontario Works, there is no such provision in Child Care or RGI housing legislation.

From the point of view of horizontal equity and subsidizing people according to their ability to pay, the approach could justifiably be extended to cover all three programs. However, given the lack of experience with this approach in Child Care or social housing, there was very little information as to how often this actually arose and whether the administrative costs would exceed the amount repaid. The idea of extending this type of provision beyond Ontario Works certainly seemed to merit further study. Given the separate recommendation that a review of all the financial testing rules take place (recommendation #2) it seemed appropriate to include the issue of agreement to reimburse in that exercise.

(See page 31 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

While there was agreement with the intent of this recommendation, there were also several practical concerns expressed, such as administrative issues related to:

- collection, monitoring and policing,
- clarification of future income and types of income, and
- the fact that "income" needs to be clearly defined.

PRINCIPLES

- the amount of staff time spent on a financial testing activity is in keeping with the dollar amounts involved
- generalist and expert staff are deployed according to the task requirements

12. Qualifications And Training Requirements for Front Line Staff

Recommendation #12
That CMSMs review their approach to staff training as it pertains to all three programs. (medium term)

ANALYSIS AND DISCUSSION

CMSMs already have responsibility to train their staff to do financial testing for Child Care fee subsidies and Ontario Works. The unknown element from the municipal perspective is the nature and extent of training taking place for the staff of social housing providers. The regional staff of the Ministry of Municipal Affairs and Housing have for some time conducted workshops on financial testing across the province. As devolution takes place, the training responsibility will move to CMSMs.

Certainly there are similar core competencies required of staff across all three programs. This opens up the possibility of a common curriculum as a platform for training staff to be proficient in more than one program area. This can be seen by CMSMs as an opportunity to review their overall approach to training as it pertains to all three programs. Whether or not the CMSM decides to perform financial testing itself for RGI housing or leave it to the providers, the CMSM will want to be certain there is a consistent core curriculum being used and standards maintained across the board. It can also be seen as an opportunity for provincial associations such as OMSSA and ONPHA to collaborate in developing training packages.

(See page 53 of the Companion Report for program details.)

CONSULTATION HIGHLIGHTS

The idea of staff training received widespread support. However, there was concern about (a) the ability of staff to be sufficiently well-trained on these three complex programs and maintain up-to-date knowledge, (b) the availability of provincial staff training dollars, and (c) caseload flexibility.

13. Accountability Mechanisms

Recommendation #13

That designated staff in each CMSM be given access, as soon as feasible, to all client records of housing providers in their geographic area for the purpose of determining the accuracy of rent charges, the efficiency of business processes, etc. (short term)

ANALYSIS AND DISCUSSION

The term 'accountability' is used commonly throughout all levels of government as they reinvent themselves. For purposes of this report, the term means 'an obligation to answer for responsibilities conferred'.

The accountability relationship for Child Care fee subsidies and Ontario Works financial assistance has a long history and, although it is constantly evolving, the province and the CMSMs have a fundamental understanding of their respective responsibilities. There are also well-developed protocols for the ministry to assure itself that CMSMs are complying with the legislation and the services are being delivered efficiently. Given the LSR changes, the same cannot be said for social housing and the new accountability relationships between and among providers, CMSMs and the province. This relationship is now being actively developed within a framework of protocols established by the Ministry of Municipal Affairs and Housing.

Since municipalities are already assuming the full cost of the former provincial share, they are interested in learning about social housing providers and the business in general. However, when it comes to the financial testing function, there is a particular interest in learning at a detailed level. This is essential for making decisions about how this function is best performed in the future, given CMSMs are also in the financial testing business.

Given their experience in this field, some CMSMs are already in a position to begin specific information gathering on the business processes used by the various providers in their geographic area.

(See page 56 of the Companion Report.)

CONSULTATION HIGHLIGHTS

There was strong agreement for this recommendation with the proviso that CMSMs be given enough time to develop standards for reviewing client records and to secure and train staff. The short-term timeframe was questioned.

PRINCIPLE

All relevant client information is obtained and verified.

14. Accountability Mechanisms – Who Has Authority To Make Eligibility Decision

Recommendation #14

That MCSS review its directives concerning decision making authority, and conflict of interest issues, for Child Care fee subsidies, with a view to a more streamlined process including internal controls. (short term)

ANALYSIS AND DISCUSSION

All three programs require trained staff to gather and verify client information for purposes of determining eligibility and calculating the amount of subsidy.

In two programs, namely OW and RGI housing, staff who ask the client the questions and request verification are also in a position to make the eligibility decision on behalf of their organization. There are internal audit and review processes to ensure the worker remains honest.

In contrast, Child Care directives indicate that the staff administering the needs test are not approving the subsidies. This is to be done by separate staff. While this may be a situation which minimizes any potential dishonesty or conflict of interest, it may not, in fact, be very efficient. That is, the person being asked to approve the subsidy would apparently either have to repeat some of the original testing work or merely take it at face value and 'rubber stamp' the approval.

It may be preferable to let the person doing the financial test also make the eligibility decision on routine cases and rely on the periodic and random reviews of independent staff to ensure propriety.

(See page 56 of the Companion Report)

CONSULTATION HIGHLIGHTS

This agreement received support, with one region suggesting a 12-18 month time frame.

PRINCIPLE

CMSMs design business processes to reflect unique local circumstances and needs to the extent allowed by legislation and directives.

15. Standards, Authority, Delivery And Performance Measures And Reporting

Recommendation #15

15.1 -- That the new legislation needed to govern the provision of social housing (i.e. to reflect Local Services Realignment and new federal-provincial arrangements) contain the following provisions

a) that staff of CMSMs have authority, similar to that contained in the *Ontario Works Act* in terms of collecting and verifying financial information, making decisions etc. (see following recommendation for detailed listing).

b) that CMSMs be the entity responsible for the financial testing function, but also have the authority to delegate all or part of the responsibility to social housing providers.

c) that social housing providers not be permitted to contract out for the financial testing function unless the CMSM approves.

15.2 -- The legal authority of CMSMs be provided in legislation along the following lines:

a) the concept of 'delivery agent' as used in the *Ontario Works Act* be used to refer to the entity designated by the Minister of MMAH to be responsible for RGI subsidies in a geographic area (the 47 areas now designated in the legislation governing the 3 programs)

b) each delivery agent would be responsible for the administration of RGI subsidies and meet prescribed standards and follow prescribed procedures and practices

c) each delivery agent would keep information and provide it to the province in the prescribed form and manner.

15.3 -- That the province retains authority in the new legislation to prescribe the nature of the financial test and the determination of rent payable.

15.4 -- That each CMSM be required in legislation to appoint an administrator (or administrators) for the purpose of administering RGI subsidies (either a CMSM employee or housing provider employee) with responsibility to:

- receive applications for RGI subsidies
- determine eligibility for RGI subsidies
- determine the amount of subsidy
- carry out prescribed duties

The CMSM would have the flexibility to appoint a different administrator for each housing project if it wished. It could also appoint a CMSM employee for some projects and employees of housing projects in other cases if it wished.

ANALYSIS AND DISCUSSION

Relatively recent provincial legislation has permitted a significant degree of implementation of Local Services Realignment. Specifically, the *Ontario Works Act*, the *Local Services Improvement Act* and the *District Social Services Administration Boards Act* have provided for many of the standards and authorities needed.

It would appear the major remaining piece of legislation required is in the area of social housing. Until this happens, the devolution of program responsibilities cannot take place.

The Working Group saw strong parallels with Ontario Works in terms of the responsibilities and authorities CMSMs would need to have to administer RGI subsidies (e.g. eligibility and financial testing functions, investigation and information gathering powers, defining who is an approved delivery agent, internal reviews).

One key difference lies in the extent to which functions can be delegated by a CMSM to some other organization. In Ontario Works, the core functions of eligibility determination and financial testing cannot be contracted out by a CMSM. In Child Care legislation, they can be, although this does not appear to happen in practice. In RGI housing, the function is the responsibility of providers under operating agreements. Some RGI providers have contracted this function out as part of a more comprehensive arrangement with property management firms. The assumption is that new housing legislation will permit the CMSM to decide whether to leave this function with providers or perform it on an 'in-house' basis.

The remaining question is whether CMSMs should continue to be permitted to contract out the RGI function to any entity other than a social housing provider. If so, should there be any restrictions to the type of organization? If there are to be restrictions, should existing arrangements be grandparented?

There are a number of factors suggesting that with CMSM concurrence, social housing providers may have the option of contracting out:

- The CMSM will monitor the value of service closely, given the dollar amounts involved.
- The province is no longer paying any of the cost and should leave such decisions to CMSMs to get full value for their dollar.

New social housing legislation should also specify the authority of the province in terms of the kind of financial test and the reporting requirements.

(See page 51 of the Companion Report)

CONSULTATION HIGHLIGHTS

- Agree, plus the following comments: does the current situation warrant this level of intrusiveness?
- Agree, plus the following comments: municipalities should have the authority in legislation, need one technology to administer all three programs, a time frame of 18 months to 3 years.
- Agree, plus the following comments: need guidelines not regulations to allow for flexibility, CMSMs must determine the rent payable "pay for say", issue is authority/flexibiilty vs. prescribed test and rent payable.

DESIGN AND DELIVERY PRINCIPLES

- Existing information is used whenever possible.

- The amount of staff time spent on a financial testing activity is in keeping with the dollar amounts involved.

16. Recovery Of Overpayments/Arrears

Recommendation #16
That CMSMs, providers of RGI housing and child care operators collaborate to share information as to the whereabouts and employment status of current and former clients for the purposes of recovering overpayments and arrears, consistent with their authority to do so under Freedom of Information legislation and information exchange agreements affecting them. (medium term)

ANALYSIS AND DISCUSSION

All three programs must deal with the problems that arise when a client receives more assistance or subsidy than they were entitled to receive. A calculation must be done to determine the amount to be recovered. A decision must be made as to how much to recover each month in order to avoid severe hardship for the client. The amount recovered must be tracked until the sum is repaid in full. Needless to say, there is an administrative burden associated with recovering what are often fairly small amounts. Yet public perceptions regarding program integrity are undoubtedly influenced by the degree to which efforts are made to recover overpayments.

The difficulty in recovering overpayments from clients is exacerbated when clients leave the program and their whereabouts are unknown. The Working Group therefore explored the possible use of cross-program overpayment recovery mechanisms. As an example, if a client were to leave Ontario Works with an overpayment owing and the person subsequently moved into an RGI unit, should the OW overpayment be recovered in the form of a higher monthly rent? The same question would hold in reverse and also apply to Child Care fee subsidies. (It should be noted that in order to be eligible for social housing an applicant cannot be in arrears to another social housing provider.)

While cross-program overpayment recovery would undoubtedly be an ideal feature to have in all three programs, there are many challenges and obstacles to making it a reality. The first is the ability to exchange personal client information across the programs. This is recommended elsewhere (see recommendation #5). Assuming this is in place, there is the question of who pays whom for the administrative costs associated with recovering another program's overpayment.

For example, if an Ontario Works official asked a social housing provider to recover an extra $20 per month from a former OW participant, would the provider receive any added administrative funding from the CMSM? Would the Ministry of Community and Social Services recognize this as a cost of OW administration? If the Ontario Works department were recovering RGI rent owed by a former RGI tenant, would the CMSM 'charge' the social housing provider for the service? How would an RGI provider even find out that there was an OW overpayment for a given tenant, especially if the overpayment was incurred in another CMSM?

While many of these challenges are probably solvable, they also appear to involve no small amount of added administrative cost, relative to the amounts which might reasonably be recovered. The Working Group recommends more modest but readily achievable benefits in the area of overpayment recovery without the need for elaborate processes. This would take the form of each organization continuing to be responsible for its own overpayment recovery, but using cross program and inter-CMSM information sharing as a way of tracking the movements of former recipients and tenants/members across the province. This would strengthen the ability of each CMSM and provider of social housing and child care to make an inquiry of another CMSM or provider as to the whereabouts of a current or former client. Naturally, the capacity to do this accurately and efficiently would be enhanced if a common client identifier were in place. (See recommendation #4)

This approach is also limited by the fact that there is no one computer information system for all three programs. This means that, for most inquiries, there would have to be a fax or letter from one CMSM/provider to another CMSM/provider, to determine if a former client with an overpayment had shown up on their system. With enhanced information sharing authority, this method may prove worthwhile where the amount to be recovered from a person is substantial. This approach also calls for a certain amount of reciprocal professional courtesy between all CMSMs/providers.

(See page 46 of the Companion Report)

CONSULTATION HIGHLIGHTS

Agree, plus the following comments:
Need to ensure compliance with FOI, need to advise client clearly "up front", appropriate technology required, not an "add on", opportunity presented here to link with BTP, privacy and accountability are fundamental, who pays administrative costs, need to assess if it can pay for itself.

17. Fraud, Reporting And Control

Recommendation #17

17.1 That each CMSM review its approach to receiving information and investigating suspected fraud, as it pertains to all three programs. (medium term)

17.2 That as part of the devolution of social housing, the province institute a requirement for a review of fraud prevention procedures across all three programs. (medium term)

17.3 That the province, working in conjunction with CMSMs examine the implications of extending the scope of information sharing agreements to include all three programs. (medium term)

ANALYSIS AND DISCUSSION

Intentionally receiving public funds to which one is not entitled is unacceptable in any program. In examining these three programs, it becomes apparent that each program possesses different risk factors. CMSMs will need to study these factors in order to be able to implement appropriate mechanisms to prevent and control fraudulent activity.

Section VI of Part A identifies some key program characteristics. From the perspective of fraud prevention and control, perhaps the key characteristic is whether a program is open-ended or not. Ontario Works is an open-ended program. That is, every person who qualifies for an allowance receives it within a matter of days. In contrast, both Child Care fee subsidies and the number of rental units with RGI subsidies are limited in supply (often referred to as 'rationed' programs). People who are financially and otherwise eligible for subsidy usually have to wait, often for a long time.

As a result, every time a person is prevented from defrauding Ontario Works, (i.e. intentionally receiving money they are not entitled to) there is a direct savings. Under 80/20 cost sharing, the province (80%) and municipalities (20%) share in the savings. In Child Care, when a person is prevented from committing fraud in obtaining a subsidized space, this results in that space becoming available to someone else. There are no direct dollar savings, per se. However, as there is a limited annual Child Care budget, this means that the fraudulent parent not only received a subsidy she or he was not wholly or partially entitled to, but also denied another parent this service. The consequences to the other parent could mean loss of a job or training program, and/or unnecessary continued reliance on social assistance.

As in Child Care, fraud, in the subsidized housing system can mean that an RGI unit is being denied to someone who is on the waiting list. It can also, in other cases, mean a tenant is underpaying rent. In such cases, every dollar of rent not collected is a dollar that municipalities have to pay.

Given the open ended nature of Ontario Works and the 80% provincial interest, the Ministry of Community and Social Services has established a province-wide Fraud Hotline. Anyone can make an anonymous call to report what they believe to be fraudulent behaviour. There are well-developed protocols for forwarding this information to municipalities which follow-up on the information received. Many municipalities have OW staff specially trained in investigation.

In social housing, suspected fraud/ misrepresentation is usually reported to the housing provider and anonymity is typically part of the understanding; otherwise information is unlikely to be forthcoming. Most housing providers do not have staff dedicated solely to investigation. Most perform this function through the rent review process. Given the physical proximity of tenants/members, there are opportunities for them to observe one another and interact in ways that could lead them to believe a particular neighbour is committing fraud. As a consequence, calls to social housing providers to report suspected fraud are not uncommon. However, many such calls are also of a vexatious nature or the informant is simply ignorant of the rules for RGI housing. For example, they may not know that a tenant is actually allowed to work and still be in a subsidized unit.

When it comes to Child Care fee subsidies, reports of demonstrated fraud are believed to be relatively infrequent. Some municipalities make use of OW staff with investigative specialities.

Some consideration was given to the idea of extending the scope of the provincial Fraud Hotline to include RGI housing and Child Care fee subsidies. On the one hand, this would permit housing providers and CMSMs (for child care) to receive this information in an orderly, anonymous and structured way. It might also mean that there is better allocation of limited spaces to those who need them most. On the other hand, investigation is a labour intensive exercise and, as noted above, there are often no direct dollar savings to the taxpayer, albeit the taxpayer's degree of support for the programs is likely enhanced when there is a demonstrable mechanism to prevent fraud.

Finally, the provincial financial interest in operating a fraud hotline for an expanded array of programs is not as compelling as the interest in Ontario Works. This is especially true for RGI housing, since the savings would accrue entirely to municipalities.
Whatever approach each CMSM chooses to take to prevent and prosecute fraudulent

activity, it is reasonable on the part of the province to expect each CMSM to undertake a systematic review of its practices in the context of its new responsibilities for the three programs. This should be a clear provincial expectation and a condition of cost sharing.

On balance, the Working Group saw the matter of fraud in the Ontario Works program as impacting on CMSMs and the province quite differently than in social housing or in Child Care. Furthermore, the way in which the question of fraud was approached locally could exert a strong influence on how programs were perceived within the community. Consequently, the conclusion was that each CMSM should establish its own measures for reporting fraud across the three programs, taking the OW province-wide hotline as a given. For example, some CMSMs may choose to have all housing providers refer all information they receive about suspected fraud to the hotline so they can be investigated as part of the normal work of OW eligibility review staff. Other CMSMs may wish to set up their own type of confidential hotline and receive complaints about fraud directly.

There is another dimension to fraud control that seems relevant, namely the capacity to exchange information with other jurisdictions outside the three programs, for example income tax authorities or the employment insurance commission. It is understandable that the Ministry of Community and Social Services has successfully negotiated a number of information sharing agreements for social assistance programs, given:

- the significant provincial financial interest,
- the open ended nature of Ontario Works, and
- the use of an accurate and current database covering most of the province.

There is utility in reviewing the possible benefits of negotiating new agreements covering these programs as well. For example, the ability to confirm information with the income tax authorities would likely be well used. The federal government might not be willing to provide information to a social housing provider and may insist that all data remain in provincial hands. Even so, if the province were to act as a secure 'clearing house' between providers and the federal government, this may achieve real benefits. The Working Group saw merit in exploring new areas for information sharing agreements, incorporating both Child Care fee subsidies and RGI housing.

(See page 48 of the Companion Report)

CONSULTATION HIGHLIGHTS

In the Social Housing Focus Groups there was a great deal of sensitivity around making the RGI system like "welfare", and stigmatizing clients. Social Housing providers take the integrity of their system very seriously and believe that the manner in which they run their programs, being on site, integrating income testing and property management functions are very effective in preventing and identifying fraud. Providers do see a role for CMSM expertise when difficult situations arise.

17.1 There was agreement in the CMSM consultations for this recommendation. The following comments were made: standards should be the same for all programs, exchange of information and expertise among programs is helpful to all.

17.2 Agreement with the following comments: need a consistent set of fraud prevention procedures used province-wide, with appropriate training.

17.3 Agreement with the following recommendations: needs to be enshrined in each piece of legislation, continue joint examination of information sharing opportunities.

Part D – CONSULTATION INPUT

As outlined in Section V of Part A, the Working Group included province-wide consultation sessions as a key part of its work. Part D of the report consists of the report of the independent consultant hired to facilitate consultation sessions and report on his findings.

In addition, a number of provincial associations met with the working group and/or provided written input. The following three Associations submitted briefs, which are included in their entirety as Appendix I:

- Co-operative Housing Federation of Canada - Ontario Region
- Ontario Association of Non-Profit Homes and Services for Seniors
- Ontario Non-Profit Housing Association

The Working Group also met with representatives of the Association of Municipalities of Ontario and the Ontario Municipal Social Services Association to review the draft report.

The report of the consultant follows.

CONSULTATIONS WITH CMSMs AND SOCIAL HOUSING PROVIDERS

Consultant's Report

Background and Purpose

In the fall of 1999, a province-wide consultation process with the Consolidated Municipal Service Managers (CMSMs) was launched in order to achieve three key objectives:

1. To receive feedback from CMSMs on the utility of the report to them as they assume administrative responsibility for all three programs.
2. To receive input on the recommendations contained in the report.
3. To "model" a consultation process which CMSMs may use in their own local consultations with their stakeholders.

An independent external facilitator, Dr. David Sheridan of Sheridan Consulting Services was engaged in early September to assist in all aspects of the consultation, including preparing materials to accompany the report, facilitating the sessions and preparing meeting notes. The facilitator worked closely with members of the Working Group throughout the consultation process.

The Consultation Process

At the outset it was decided to provide a decentralized consultation process, with sessions in the various regions rather than at a central location. This was an important way for the consultant and the Working Group members to get a true sense of the local situations and also enabled the meeting attendees to participate more freely on their "home ground". By using this approach a number of significant regional differences were identified which otherwise might have been missed.

Ten full-day consultation sessions were conducted at the following locations:

October 20, 1999	Mississauga	Central West Region
October 21, 1999	Newmarket	Central East Region
October 22, 1999	Hamilton	Hamilton/Niagara Region
October 26, 1999	London	South West Region
November 2, 1999	Thunder Bay	Northern Region
November 8, 1999	North Bay	North East Region
November 9, 1999	Sudbury	Northern Region
November 15, 1999	Ottawa	Eastern Region
November 16, 1999	Kingston	South East Region
November 18, 1999	Toronto	Toronto Region

Regional contacts from MCSS and MMAH issued meeting invitations to a cross-section of management level CMSM staff from the affected programs and handled meeting arrangements at each location. Attendance at the consultation sessions ranged from 7 to 25 participants, an average of 19 participants per meeting.

Prior to the sessions, consultation participants received a consultation kit consisting of the following:

- A draft meeting agenda
- A CMSM Consultation Guide providing additional context for the consultations and some focus questions to consider as they read the reports
- A CMSM Response Worksheet consisting of a series of questions about the report with space for anyone in their organization to write in any comments. Participants were encouraged to give copies of the Worksheet to selected colleagues and bring completed copies to the consultation meeting
- A copy of the draft main report
- A copy of the draft companion report
- A copy of the report entitled "Roles and Responsibilities". This report was prepared in early 1998 and provided an overview of the roles of the province, municipalities, boards and other parties in legislation, funding and delivery for social and community health services

A central part of the consultation process was a series of focus questions closely linked to specific sections of the draft report. These consultation questions were contained in the Consultation Guide, the Response Worksheet and addressed directly in the consultation sessions. The standardized focus questions provided a useful "consultation template", ensuring the consistent and valid collection and interpretation of consultation data across all ten consultation sessions. The focus questions are reproduced below.

FOCUS QUESTIONS

Part A - Context

This section of the report provides background information on the project. We are interested in your feedback on the clarity and accuracy of the information.

A1 Are there any aspects of the Working Group's mandate or project background that you are not clear about?
A2 Are there any parts of the description of local services realignment that are unclear to you?
A3 Have any important stakeholders been missed?
A4 Are the observations about the implications of the changes for the various stakeholder groups correct? Have any been missed?
A5 Are there any important distinctions between the three programs that have not been identified?
A6 Do you have any comments or observations related to the issue of privacy in the financial testing function?
A7 Any other comments about this section?

Part B - Service Delivery Models

This section looks at the "big picture" to see various ways that CMSMs can organize and deliver services to best address local needs and conditions. We are interested in your ideas about the different options that are suggested.

B1 Do you agree with the vision statement?
B2 Does the vision statement apply to your CMSM?
B3 Have any design and delivery principles been missed?
B4 What do you feel is the most important principle?
B5 What is the most significant challenge facing CMSMs as they implement the LSR changes?
B6 What is the most significant opportunity?
B7 Are the reasons for differences between pathways clear?
B8 What is the most significant trend in service delivery?
B9 Are the three key assumptions underlying models for the financial testing function correct?
B10 Do you agree with the selection of the six design variables?
B11 Are there any other factors to consider in choosing a delivery model?
B12 Pros and cons of the delivery scenarios for social housing?
B13 Pros and cons of the delivery scenarios for child care?
B14 Are the assumptions concerning models for intake and waiting list management correct?
B15 Comment on the various design options: physical set-up, "virtual office", intake staff, child care waiting list management.
B16 Can you think of any different model configurations?
B17 Any other comments about the service delivery models section?

Part C - Developing Recommendations

This section of the report makes a number of recommendations intended to bring about efficiencies in business processes and improvements in customer service. We are interested in your response to specific recommendations.

C1 Please comment on any of the following recommendations regarding determining eligibility. Do you agree with the recommendation? Suggested alterations? Any implementation advice?

1. Decision making principles
2. Policy consistency
3. Standardized forms
4. Common client identifier
5. Strategies to improve
6. Privacy requirements and information sharing
7. Capacity to share data and common linkages
8. Dispute resolution appeals
9. Verification processes
10. Realizing resources available
11. Agreement to reimburse
12. Front line staff
13. Accountability mechanisms

14. Authority to make eligibility decision
15. Standards and performance measures
16. Recovery of overpayments/arrears
17. Fraud reporting and control

C2 Any other comments about this section?

General

G1 How can the report be made more useful as a resource in your local services planning?
G2 Do you have any ideas for increasing the utility of the companion report?
G3 Should the report make any comments about speed of implementation? If so, what should it say?
G4 Processes will be needed at the CMSM level to help make decisions. What should the report say, if anything, about this?
G5 What specific supports will be necessary to aid CMSMs with the transition? What should the report say about this?
G6 Any other comments, observations or suggestions?

The consultation sessions were hosted by the MCSS and MMAH contacts and led by the facilitator. Typically, at least two Working Group members were in attendance as "active listeners" at each meeting, adding credibility to the process. Each session was about six hours in duration. Agendas and facilitation techniques were varied to suit the needs, composition and "personality" of each group, but all sessions encompassed the following components:

- An introduction with welcoming remarks from the regional Ministry contacts, a brief project overview and an exercise to identify participant expectations
- An "environmental scan" where participants identified strengths, weaknesses, opportunities and threats related to the CMSMs across the province. This exercise provided a broad context for the deliberations
- A series of focus groups, where breakout groups met to review designated components of the report and respond to the focus questions. Group reports were then followed by plenary discussion and consensus seeking
- Small group activities to comment on the specific recommendations contained in the report
- Follow-up focus group work to expand on issues raised in the session and respond to points raised in other consultation sessions
- Exercises to gather specific suggestions on ways to increase the utility of the report and solicit advice regarding its implementation
- A closure discussion to identify next steps and evaluate the meeting against participant expectations

A typical agenda appears below:

WORKING GROUP ON FINANCIAL TESTING
Regional Consultation Session Agenda Outline

Morning Agenda

- Introduction
    - Welcoming remarks
    - Project background
- Context
    - Trends, events and issues
    - The CMSMs - an environmental scan
- Focus Groups
    - Breakout groups meet to review designated components of the report:
        - Context (A1-A7)
        - Vision and guiding principles (B1-B8)
        - Model assumptions and variables (B9-B11)
        - Model analysis (B12-B17)
        - Recommendations (C1)
        - Implementation (G1-G6)
- Feedback
    - Group reports, discussion and consensus seeking

Afternoon Agenda

- Reality Check
    - Review of session progress
    - Identification of areas of consensus
- Linkages and Elaborations
    - Results from other regional consultation sessions
    - Focus groups expand on designated themes
    - Discussion and feedback
- Moving Forward
    - Issues inventory
    - Implementation advice
- Closure

Facilitation techniques consisted of information presentations, breakout group work, plenary discussions, question and answer cycles, brainstorming activities, and card response exercises. It was particularly important to capture the cumulative nature of the participant input. Thus, each session included activities comparing participant comments to comments made at previous sessions. Points raised at previous sessions were presented to meeting participants for reactions and validation. New points raised at each session were carried forward to subsequent sessions for confirmation and elaboration. In this way, the consultation data represented a cumulative province-wide response to the report, rather than isolated findings from ten separate consultation sessions.

Rigorous documentation procedures were instituted to ensure complete and accurate reporting of all participant input. Breakout group work by focus groups at the sessions was recorded on transparencies and presented in plenary. Points raised in plenary discussions were captured in notes taken by Working Group members. Flip charts were employed to record participant points related to the environmental scan, responses to recommendations and ideas generated during structured brainstorming exercises. Index cards were used to collect participant suggestions, questions and session feedback.

The notes from each session were then transferred to a consultation template which sorted and organized the information under specific focus questions. This enabled an identification of areas of consensus across the ten consultation sessions and well as within individual meetings. (The final template was 50 pages in length and is available to CMSMs as a resource document by contacting (416) 325-5320). In addition, notes recording the proceedings at each session were sent to all meeting participants. As a final validation step, participants were encouraged to review the notes and forward any comments or revisions to the Working Group.

Each session was evaluated by the participants. At the beginning of the meeting participants anonymously wrote on cards their own personal definitions of a "successful" meeting. (Responses varied, but the main categories were increased understanding of the project, a chance to "be heard", and opportunities for networking). This information was immediately implemented to adjust the day's planned activities to meet expressed participant needs. At the end of each meeting, participants again used cards to rate the meeting against their own expectations on a five point scale, identify things they liked and disliked and make any suggestions about future meetings.

The meetings were well received, with average participant ratings ranging from a low of 3.2 to a high of 4.3. The overall rating across all meetings was 3.8 out of 5, a solid result given the fact the participants were evaluating the sessions against their own expectations.

When asked to state what they liked about the sessions, participants referred to the opportunities for input and dialogue, facilitation techniques, level of participation, involvement of Working Group members, information sharing and networking. Dislikes included the lack of time for in-depth discussion of issues, legislative uncertainties, lack of direct representation from the social housing sector, and some facilities concerns. Suggestions offered by participants were minimal and pertained mainly to expanded representation and some meeting mechanics. Overall, meeting participants were appreciative of the opportunity to provide input. They particularly liked the "outreach" nature of the process, and the fact that the meetings were held in their local regions. (A detailed compilation of the participant feedback from the ten consultation sessions is available to CMSMs as a resource document.)

Validity of the Consultation Data

A number of factors suggest that the consultation findings constitute a valid representation of the views of the CMSM stakeholders:

- The meetings were well attended by a good cross-section of stakeholders
- There was lively dialogue and robust participation at all ten meetings
- Participant input related directly to the focus questions
- The scale of the input was large. More than 1,000 specific suggestions were offered, ranging from minor wording changes to implementation strategies
- High levels of consensus on key points were evident at all the meetings
- Consistent themes emerged across all ten consultation sessions
- Participant evaluations were very positive
- All input was gathered within a short one-month time "window" (October 20 - November 18). During this period there were no external events or public announcements that could compromise the comparability of the data across the ten sessions

There are a number of factors to keep in mind when planning future consultation initiatives:

- The group sizes at the northern meetings could have been larger. Larger groups (15 or more participants) create more "critical mass" resulting in higher levels of participation
- In some meetings certain program areas were underrepresented
- Some "outrider" positions presented at the northern and Toronto sessions were not consistent with the mainstream consultation data. It will be important to ensure that these views are accommodated in the implementation phase
- The Response Worksheet designed to solicit input from people not attending the consultation sessions was not extensively used. Its availability and purpose could have been more widely communicated

On balance, it appears that the Working Group can have a high degree of confidence in the information generated by the provincial consultation. The high level of buy-in to the consultation process can translate into broad province-wide support for the report and its recommendations.

Consultation Findings

Environmental Scan

At the beginning of each consultation session, participants worked in small groups to identify present strengths and weaknesses and future opportunities and threats for the Ontario CMSMs. Points made at the ten meetings can be summarized as follows:

Strengths:	Dedicated staff Experienced Good track record

Local knowledge
Flexible and adaptable
Community linkages

Weaknesses:
Financial constraints
Fragmentation - programs working in "silos"
Disparities in service levels
Delivery challenges
Transition challenges
Minimal experience with social housing
Lack of overall direction

Opportunities:
Improved service through one-stop shopping
Increased responsiveness to local needs
Efficiencies, economies of scale
Networking and partnerships
Consistency in program delivery
Information sharing
Improved coordination and strategic direction

Threats:
Funding changes
Territorialism
Job loss
Imposed provincial policies
Changes in the economy
Pace of change

Part A: Context

A series of focus questions pertained to the section of the report dealing with the background, purpose and approach of the Working Group. Findings from the consultation sessions revealed the following:

- The mandate and background of the project was clear and well described in the report
- Some questions were raised by participants about the rationale of focusing the project on administrative rather than policy issues
- The listing of stakeholders in the report was seen to be complete, although some participants felt that the client groups could be emphasized more. Some participants also thought that the implications for social housing providers were understated
- The distinctions between the three programs were clearly identified although many participants stated that the client overlap statistics appeared overstated
- Overall, the main report and the companion report were very well written and viewed as excellent resources

Part B: Service Delivery Models

A second series of focus questions related to the section of the report that outlined a number of possible alternatives for service delivery. Findings were as follows:

- There was agreement with the vision statement, although the client service component could be emphasized more. The vision statement was considered applicable to most CMSMs
- Suggested additional design and delivery principles were client-centred, flexibility and seamlessness. There was no clear consensus on what was the most important principle
- The most significant implementation challenges were funding, obtaining stakeholder commitment, dealing with change, human resource issues and educating municipal politicians
- Significant opportunities were local solutions, partnerships, integrated systems and achieving efficiencies
- The reasons for differences between client pathways outlined by the report were clear to the participants
- Technology, efficiency and accountability were seen to be the most significant trends in service delivery
- The three key assumptions underlying models for financial testing were considered to be correct. The flexibility assumption was viewed as particularly critical
- There was agreement with the selection of the six design principles
- Suggested additional factors to consider in choosing a delivery model included technology, funding arrangements, training, linkages to other provincial initiatives and HR/labour relations
- The assumptions concerning models for waiting list management were considered to be correct, although there were some concerns about feasibility of implementation
- Comments regarding physical set-up suggestions included concerns about stigmatization of clients not on Ontario Works, the need for adequate technology and cost factors
- Comments regarding the "virtual office" included the need for adequate technology and language, knowledge and expertise considerations
- Comments regarding intake staff included information overload concerns
- Comments regarding child care wait list management pointed out the need for flexibility across CMSMs
- Third party contract of services was suggested as an additional model configuration

Composite participant comments about the pros and cons of the different delivery scenarios for social housing and child care intake/wait list management appear in the following charts:

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Social Housing Delivery Scenarios

	Pros	Cons
1. Leave the financial testing and verification function with providers	▪ No change for clients ▪ Avoids welfare stigma ▪ Retains housing focus ▪ Local knowledge of clients	▪ Fragmented ▪ Efficiencies not realized ▪ Duplication ▪ Service not improved
2. Leave with providers, specific cases referred to CMSM	▪ Consistency with unusual situations ▪ Provides a third party perspective	▪ Delays in decision making ▪ Impact on human resources
3. Leave with large providers. Take over from small providers	▪ Uses existing systems and expertise ▪ Economies of scale	▪ Fragmented
4. Leave with providers if majority of units are for seniors	▪ Recognizes uniqueness of seniors	▪ Potential for charter challenge
5. CMSM does initial intake, providers do updates	▪ Initial test standardized	▪ Updates could be fragmented
6. Take over function from all providers	▪ Consistency ▪ One-stop shopping ▪ Opportunity for improved technology ▪ Efficiencies realized	▪ Additional resources required ▪ Reinforces welfare stigma

Child Care Delivery Scenarios

	Pros	Cons
1. Keep the financial testing for fee subsidies separate from Ontario Works	▪ Program objectives are different ▪ Uses knowledge base	▪ No efficiencies ▪ Duplication
2. Keep separate, use Ontario Works staff for specialized work	▪ Develops skills and competencies ▪ Uses existing Ontario Works expertise	▪ Delays in decision making ▪ Conflicting rules
3. Merge the function with Ontario Works	▪ Reduction of overlap ▪ Consistency between the two areas	▪ Difficult to have competencies in all functions
4. Merge with Ontario Works and Social Housing in a generically named unit	▪ Consistency ▪ Customer identification ▪ May reduce Ontario Works stigma	▪ Confusion for users ▪ Resource implications ▪ Confidentiality issues

Part C - Recommendations

Participants in the consultation process were asked to respond to the individual recommendations contained in Part C of the draft report. Findings are summarized below:

Recommendation # 1 - DECISION MAKING PRINCIPLES
- There was agreement with this recommendation

Recommendation # 2 - POLICY CONSISTENCY
- There was agreement with the recommendation regarding policy consistency, provided program differences are respected

Recommendation # 3 - STANDARDIZED FORMS
- There was agreement on the need for standardized forms
- Several groups felt that the technology should be in place first

Recommendation # 4 - COMMON CLIENT IDENTIFIER
- There was agreement on the need for a common client identifier
- Some groups pointed out the potential for "smart card" applications

Recommendation # 5 - STRATEGIES TO IMPROVE
- There was agreement with this recommendation
- Several groups questioned the proposed short-term time frame

Recommendation # 6 - PRIVACY REQUIREMENTS AND INFORMATION SHARING
- There was agreement with this recommendation
- Freedom of Information and Personal Privacy Act implications were identified
- Several groups questioned the proposed short-term time frame

Recommendation # 7 - CAPACITY TO SHARE DATA AND COMMON LINKAGES
- There was agreement with this recommendation
- Some groups questioned the feasibility of developing a local system of information sharing

Recommendation # 8 - DISPUTE RESOLUTION/APPEALS
(These recommendations were presented as focus questions)
- Consultation participants did not feel that the Social Benefits Tribunal should have any jurisdiction in child care or social housing since these programs already have their own internal appeal mechanisms
- There was agreement that common rules and standards should exist
- There was agreement that internal reviews/appeals should be reviewed for clarity and consistency

Recommendation # 9 - VERIFICATION PROCESSES
- There was agreement with the formation of a Verification Procedures Review Group, although diverse opinions regarding membership
- Flexibility re: local needs was seen to be important

- Some groups expressed implementation concerns
- An internal program audit unit was seen to be worthwhile

Recommendation # 10 - REALIZING RESOURCES AVAILABLE

- There was agreement in principle with this recommendation
- Flexibility re: local needs was seen to be important
- Some groups expressed implementation concerns

Recommendation # 11 - AGREEMENTS TO REIMBURSE

- There was agreement in principle with this recommendation, but a number of implementation concerns were raised
- Some groups identified a need for clarification and definition

Recommendation # 12 - FRONT LINE STAFF

- There was strong agreement with the recommendation regarding staff training

Recommendation # 13 - ACCOUNTABILITY MECHANISMS

- There was agreement that CMSM staff be given access to financial records re: housing
- Some staffing and training implications were identified
- A longer time frame was suggested

Recommendation # 14 - AUTHORITY TO MAKE ELIGIBILITY DECISIONS

- There was agreement with this recommendation

Recommendation # 15 - STANDARDS AND PERFORMANCE MEASURES

- There was agreement with the recommendations regarding standards and performance measures
- The need for adequate technology, flexibility, legislative authority and appropriate lead times was raised by several groups
- *Freedom of Information and Personal Privacy Act* implications were identified

Recommendation # 16 - RECOVERY OF OVERPAYMENTS/ARREARS

- There was agreement with this recommendation, given appropriate technology to support information sharing
- *Freedom of Information and Personal Privacy Act* implications were identified

Recommendation # 17 - FRAUD REPORTING AND CONTROL

- There was agreement with this recommendation
- Several groups emphasized the importance of consistency in this area

New Recommendation re: TECHNOLOGY (New recommendation reflected in final report)

Technology was a recurring theme raised by participants at all the consultation sessions. Mid-way through the process, the group at the meeting in Eastern Region proposed the following recommendation:

> "That there be one database provincially developed that would accommodate the needs of all three programs. It would need to recognize the diversity of the CMSM and allow flexibility within the system. This should build on existing systems such as BTP on the current OWT/CWT database"

This recommendation was reviewed at the remaining two consultation sessions in the South East and Toronto Regions. There was agreement, although major policy and technology implications were noted.

Report and Its Implementation

The final series of focus questions pertained to the actual report and its implementation. Consensus emerged around the following points:

- The report was well-written and will be a useful resource to the CMSMs
- The companion report will be a useful job aid and training tool
- Some groups suggested including a question/answer section to address issues related to the Working Group's mandate, timing, and funding
- The use of pilot sites was recommended by several groups
- Some groups felt the implementation should not proceed until the Social Housing legislation was known
- Specific supports considered necessary to aid CMSMs with the transition included funding, technology, information on legislation, training, best practices and performance standards
- Differences among the CMSMs should be considered in any implementation plans
- An educational package linked to the report was suggested
- Stakeholder input was seen to be critical
- In general, the feeling was that implementation should be carefully planned, coordinated and adequately supported with technology, resources and information

Significant Issues

Although the consultation process revolved around the specific focus questions about the report, participants were also invited to raise any other significant issues.

A central issue related to concerns regarding the potential "stigmatization" of the Social Housing and Child Care programs and their clients depending on how these programs were delivered relative to the Ontario Works program. This was a major issue raised at every consultation session. The feeling was that the larger Ontario Works program could eclipse the other two programs, creating a "welfare stigma" for their clients.

Some other issues were outside the mandate of the Working Group, but were also raised in the sessions. These can be grouped under five main areas:

1. The timing and amount of funding transfers.

2. Transition issues, including human resource protocols, information about legislation varying degrees of readiness re: other downloaded programs and availability of transition dollars.

3. The need for a solid technological infrastructure to facilitate joint program integration and delivery.
4. The need to clarify and articulate connections between this project and the Business Transformation Project.
5. Local politics, and the importance of educating and gaining the support and understanding of elected municipal officials.

Regional Differences

Although there was strong consensus on most of the major points related to the report, the Toronto region and the northern regions presented different positions and responses to some of the focus questions.

In the north, the major differentiating factor was the size of the catchment areas and the resulting challenges of delivering social services to a diverse population spread over a large geographic area. Northern Region, for example, encompasses an area equal in size to the other eight MCSS regions. North East Region faces similar delivery challenges. A second factor was the different telecommunications infrastructure in the north, and the preponderance of party lines that would create difficulties in instituting call centres. As a result of these differences, participants at the northern meetings (Sudbury, North Bay and Thunder Bay) supported the Working Group's recommendations in principle, but expressed major concerns about the practicality of implementing them in their particular regions. Different timing and resource levels may therefore be necessary for implementing some of the recommendations in the northern regions.

Toronto Region also has some unique characteristics which led to a different response to some parts of the Working Group report. Unique characteristics of this CMSM included the size of programs and budgets involved, the diversity of the city, the high political profile of social issues in Toronto, the existence of numerous sophisticated advocacy groups, greater degrees of population concentration and the need to address multiple language capabilities. In addition, Toronto has already undergone an amalgamation and many of the issues related to harmonization of services have already been addressed. In fact, some of the recommendations in the report are already in place in Toronto Region.

Social Housing Focus Groups

A related component of the consultation process involved holding four focus groups with social housing providers in different parts of the province. These were run in parallel with the CMSM consultations. The purpose of the focus groups was to receive feedback and suggestions from the providers as they worked with the CMSMs to form new relationships. The sessions were sponsored by the Ministry of Municipal Affairs and Housing and conducted at the following locations:

October 25	London
November 5	Ottawa

November 10	Sudbury
November 25	Toronto

The full-day sessions were facilitated by Dr. David Sheridan of Sheridan Consulting Services, the same consultant that ran the CMSM consultation sessions. Each session contained the following components:

- An exercise to identify participant expectations for the session
- A presentation on the background of the Financial Testing project by an MMAH representative from the Working Group
- An environmental scanning exercise, where breakout groups identified present strengths and weaknesses and future threats and opportunities for social housing in Ontario
- A structured activity to identify implications and issues
- Breakout group work to develop responses to specific themes identified by the group, followed by plenary discussions
- Structured brainstorming activities to identify specific improvement areas and implementation suggestions
- A closure discussion to identify next steps and obtain participant feedback on the session

The Social Housing focus group participants received copies of the draft Working Group report in advance. However, they were not asked to comment on all the focus questions, or respond directly to individual recommendations as their interests were more in the issues and implications related to the social housing aspects of the report.

A typical session agenda appears on the next page:

WORKING GROUP ON FINANCIAL TESTING
Consultation Session With Social Housing Providers

Morning Agenda

- Introduction
    - Welcoming remarks
    - Session overview and facilitation plan
    - Project background
- Context
    - Trends, events and issues
    - Social Housing - an environmental scan
- Implications
    - Activity to identify implications and issues

Afternoon Agenda

- Responses
    - Breakout groups expand on designated themes
    - Group reports, discussion and consensus seeking
    - Linkages to other consultation sessions
- Moving Forward
    - Implementation advice - How can the CMSMs ensure that the provider view is reflected in implementation planning and decision making?
- Closure
    - Next steps
    - Session evaluation

Facilitation techniques were similar to those employed at the CMSM consultation sessions. Points raised in the sessions were cross-validated by participants at other meetings. Documentation methods were also similar, with extensive use of flip charts, breakout group reports recorded on transparencies, and index to collect issues, concerns and suggestions. Meeting notes were distributed to all meeting participants and transferred to a consultation template which organized the information for the focus groups under specific headings. (The template is available to CMSMs as a resource document by calling (416) 325-5320.)

It should be noted that participants asked why the meetings with the CMSMs and the Social Housing providers had not been combined. The Working Group felt that separate processes were necessary in view of the large number of questions to be addressed and the different vantage points of the various participants. The successful outcome of the consultation process suggests that this was a valid decision. During the process, opportunities were taken to draw linkages between the CMSM and Social Housing sessions. For example, in one region, CMSM participants generated a list of questions to be addressed by Social Housing providers at another session. In another region, issues raised at a Social Housing focus group were presented and discussed at the regional consultation meeting with CMSMs. References to points made at CMSM sessions were continually shared with participants at Social Housing focus groups and vice versa. These cross linkages between the two parallel processes enhanced the level of dialogue and increased the validity of the consultation data.

The Social Housing providers were somewhat skeptical about the process and whether their opinions were really going to be considered, but the meetings were still well received. Using the same evaluation approach as the CMSM sessions, average anonymous participant ratings were 3.1 to 4.1 The overall rating across all four focus groups was 3.7 out of 5, similar to the ratings received from the participants at the CMSM sessions.

Data obtained from the four Social Housing focus groups can be considered to be an accurate reflection of the views of the social housing providers for the same reasons that the CMSM consultation findings are considered valid - good attendance, positive participant evaluations, and strikingly high levels of convergence of opinions on key points across all four meetings.

The key findings that emerged from the social housing focus groups were the following:

- The participants perceived the strengths of social housing in Ontario to be its good management, sensitivity to client needs, local autonomy, governing boards and experienced staff and volunteers
- The main identified weaknesses were lack of housing stock, waiting lists and limited resources
- Opportunities identified by participants included closer relationships between CMSMs and providers, improved service, increased community linkages, greater collaboration and partnerships
- Threats were seen to be loss of autonomy, bureaucratization, funding cuts and political interference
- Concerns about autonomy related to loss of distinct identity, loss of board effectiveness, loss of ownership, and high levels of control by CMSMs
- Participants at all four focus groups worried about loss of the individualized personal service now provided to social housing clients. They were concerned that providers would become more removed from the tenants, with a resulting loss of rapport and sensitivity to client needs
- The efficiency premises underlying the integration of services were questioned by the providers. Some providers predicted reduced levels of efficiency due to duplication of work and increased levels of complexity
- Some providers challenged the report's assertion that there was a 30 percent overlap of clients between Ontario Works and RGI

- There were major concerns expressed about the impact of changes in procedures on seniors. The feeling was that seniors would have difficulty accessing remote office locations, dealing with technology and coping with a potentially higher level of bureaucracy.
- Other groups with special needs, such as the physically disabled, mentally ill and homeless were seen to be negatively impacted by the changes
- "Stigmatization" was a theme raised at all four focus groups. The feeling was that many of the RGI consumers who were not currently clients of Ontario Works would be humiliated by the "social welfare" stigma.
- There were also concerns expressed about the involvement of local politicians with social housing and the fact that social housing could be competing with other municipal services for property tax dollars
- Many providers felt the report focused disproportionately on negative factors such as misreporting and fraud

Participants at the focus groups reviewed the six service delivery scenarios and three draft models for social housing. There was an overwhelming preference for "Model #1" posited in the report. This was the model that was closest to the status quo, leaving the financial testing function with the providers and the CMSMs playing an audit role.

The social housing providers offered numerous suggestions to the Working Group and CMSMs involved in the transfer of the social housing function to the CMSMs. They are listed below in order of mention:

1. Leave the financial testing function with the social housing providers, but increase the amount of information sharing that takes place
2. Initiate a dialogue between the CMSMs and social housing providers as soon as possible
3. Involve the providers in planning for any new delivery model
4. Present a business case that justifies the change
5. Maintain a focus on client needs
6. Seek out consumer input
7. Establish strong provincial standards to ensure social housing does not deteriorate
8. Respect the ownership and existing funds of private non-profits
9. Recognize sector expertise such as MMAH, ONHPA, CHF etc.
10. Encourage cross-learning between the providers and CMSMs

In sum, valuable input was received from the social housing providers. Although this group expressed anxiety about the fate of a system to which they are committed and in which they have a great deal invested there was a very robust message that they welcome CMSMs to talk to them, learn about their projects and their business, and explore how devolution can work.

Submitted by:

Dr. David Sheridan, Principal
SHERIDAN CONSULTING SERVICES January 2000

Part E -- SUMMARY OF RECOMMENDATIONS

RECOMMENDATION	TIME FRAME
Recommendation #1 -- DECISION MAKING PRINCIPLES That each CMSM involve its own staff and all stakeholders in order to develop a vision statement and design and delivery principles for the three programs.	
Recommendation #2 -- POLICY CONSISTENCY 2.1 That a review of all financial testing rules be undertaken across the three programs, to ensure that all rules are as compatible as possible, given the differences in program objectives. 2.2 That the review team for this activity include both provincial and municipal policy and program staff, each with a background in one or more of the three programs, seeking the advice of social housing and child care providers in a meaningful way. 2.3 That the Companion Report be considered a key reference document for this review.	SHORT TERM
Recommendation #3 -- STANDARDIZED FORMS That a Working Group of CMSM and provincial staff representing all three programs make specific recommendations as to the forms which should be revised to achieve efficiencies and better service. This Working Group should include the advice of social housing and child care providers.	SHORT TERM
Recommendation #4 -- COMMON CLIENT IDENTIFIER That a unique client identifier be assigned to any individual who is benefiting directly or indirectly (i.e. as a spouse, dependant adult or dependant child) from RGI subsidies on Child Care fee subsidies or Ontario Works.	OW MEDIUM TERM CC&RGI LONG TERM
Recommendation #5 -- STRATEGIES TO IMPROVE That a Working Group of staff from CMSMs and provincial staff representing all three programs, plus social housing provider representatives examine: 5.1 the feasibility of developing one information system for purposes of capturing tenant financial information, calculating and administering rents, etc. 5.2 the nature and extent of connectivity and information sharing with the Child Care fee system and the social assistance information system which should be sought in the long term 5.3 how technology will deliver a simple, seamless interface at a single workstation which staff can use in the delivery of a variety of programs sought in the long term	7.1 & 7.2 SHORT TERM

RECOMMENDATION	TIME FRAME
Recommendation # 6 -- PRIVACY REQUIREMENTS AND INFORMATION SHARING 6.1 That the unique client identifier (recommendation # 4) be used to facilitate information exchange across the three programs with respect to people residing within a CMSM who have applied for, or are using more than one of the three programs. 6.2 That applicants for any of the three programs be required, as part of the application process, to sign a consent to the release of personal information to the deliverer of either of the other two programs, in the event they apply for one or both of them. 6.3 That legislation governing Child Care and RGI housing include a section similar to Ontario Works (section 41) to the effect that 'personal information collected by a delivery agent may be used only for the purpose for which it was collected or for a consistent purpose'. 6.4 That the collection, use and disclosure of information for purposes of determining eligibility and calculating subsidies and assistance for all three programs be determined as all being for the same 'consistent purpose'. 6.5 That, for all three programs, consent be obtained from applicants, for the release of information to any other CMSM, ministry, federal or provincial government or any of its agencies for the purposes of administering social benefits.	6.1 LONG TERM 6.2 SHORT TERM 6.3 SHORT TERM 6.4SHORT TERM 6.5 SHORT TERM
Recommendation #7 -- CAPACITY TO SHARE CLIENT DATA AND COMMON LINKAGES 7.1 That, when a person is receiving subsidies from more than one program, that their information updates be posted separately to each program's data base. 7.2 That CMSMs and social housing providers consider developing a local system of notifying each other of changes in status of clients served in common, consistent with information sharing requirements.	7.1 MEDIUM TERM 7.2 SHORT TERM
Recommendation #8 -- DISPUTE RESOLUTION/APPEALS That, for Child Care and social housing, the province set minimum standards for CMSMs and service providers to follow in terms of timing, scope and due process requirements for internal reviews for clients who are not satisfied with a decision.	

RECOMMENDATION	TIME FRAME
Recommendation #9 -- VERIFICATION PROCESSES 9.1 That a Verification Procedures Review Group, consisting of provincial and municipal staff from all three program areas, (including the advice of social housing and child care providers) be formed to determine the optimum type of reviews and risk factors to use in triggering verification reviews in each of the programs, including identifying opportunities for business processes that can be efficiently applied across all three programs. 9.2 That CMSMs consider the opportunities that may be available by creating a form of internal program audit unit, to conduct random as well as regular reviews of the accuracy and efficiency of the verification function in each of the three program areas.	9.1 MEDIUM TERM 9.2 MEDIUM TERM
Recommendation #10 -- PURSUING OTHER INCOME AND ASSIGNMENTS-REALIZING RESOURCES AVAILABLE That the review of financial testing rules (recommendation #2) consider whether or not the financial testing authority for RGI housing or Child Care fee subsidies should include unrealized resources which might reasonably be available to a person e.g. child support, support from sponsors of immigrants, employment insurance, etc.	SHORT TERM
Recommendation #11 -- PURSUING OTHER INCOME AND ASSIGNMENTS-AGREEMENT TO REIMBURSE That the review of financial testing rules (recommendation #2) consider whether or not the financial testing authority for RGI housing or Child Care fee subsidies should include the ability to require a person to repay subsidies in the event the person realizes income in the future that pertains to the time period they were receiving subsidy.	SHORT TERM
Recommendation #12 -- FRONT LINE STAFF-QUALIFICATIONS AND TRAINING That CMSMs review their approach to staff training as it pertains to all three programs.	MEDIUM TERM
Recommendation #13 – ACCOUNTABILITY MECHANISMS That designated staff in each CMSM be given access, as soon as feasible, to all client records of housing providers in their geographic area for the purpose of determining the accuracy of rent charges, the efficiency of business processes, etc.	SHORT TERM
Recommendation #14 - ACCOUNTABILITY MECHANISMS – WHO HAS AUTHORITY TO MAKE ELIGIBILITY DECISION That MCSS review its directives concerning decision making authority, and conflict of interest issues, for Child Care fee subsidies, with a view to a more streamlined process including internal controls.	SHORT TERM

RECOMMENDATION	TIME FRAME
Recommendation #15 -- STANDARDS, AUTHORITY, DELIVERY AND PERFORMANCE MEASURES AND REPORTING 15.1 -- That the new legislation needed to govern the provision of social housing (i.e. to reflect Local Services Realignment and new federal-provincial arrangements) contain the following provisions: a. That staff of CMSMs have authority, similar to that contained in the Ontario Works Act in terms of collecting and verifying financial information, making decisions etc. (see following recommendation for detailed listing). b. That CMSMs be the entity responsible for the financial testing function, but also have the authority to delegate all or part of the responsibility to social housing providers. c. That social housing providers not be permitted to contract out for the financial testing function unless the CMSM approves 15.2 -- The legal authority of CMSMs be provided in legislation along the following lines: a. The concept of 'delivery agent' as used in the Ontario Works Act be used to refer to the entity designated by the Minister of MMAH to be responsible for RGI subsidies in a geographic area (the 47 areas now designated in the legislation governing the 3 programs) b. each delivery agent would be responsible for the administration of RGI subsidies and meet prescribed standards and follow prescribed procedures and practices c. each delivery agent would keep information and provide it to the province in the prescribed form and manner 15.3 -- That the province retain authority in the new legislation to prescribe the nature of the financial test and the determination of rent payable. 15.4 -- That each CMSM be required in legislation to appoint an administrator (or administrators) for the purpose of administering RGI subsidies (either a CMSM employee or housing provider employee) with responsibility to: • Receive applications for RGI subsidies • Determine eligibility for RGI subsidies • Determine the amount of subsidy • carry out prescribed duties The CMSM would have the flexibility to appoint a different administrator for each housing project if it wished. It could also appoint a CMSM employee for some projects and employees of housing projects in other cases if it wished.	

RECOMMENDATION	TIME FRAME
Recommendation #16 -- RECOVERY OF OVERPAYMENTS/ ARREARS That CMSMs, providers of RGI housing and child care operators collaborate to share information as to the whereabouts and employment status of current and former clients for the purposes of recovering overpayments and arrears, consistent with the their authority to do so under Freedom of Information legislation and information exchange agreements affecting them.	MEDIUM TERM
Recommendation #17 -- FRAUD, REPORTING AND CONTROL 17.1 That each CMSM review its approach to receiving information and investigating suspected fraud, as it pertains to all three programs. 17.2 That as part of the devolution of social housing, the province institute a requirement for a review of fraud prevention procedures across all three programs. 17.3 That the province, working in conjunction with CMSMs examine the implications of extending the scope of information use and disclosure agreements to include all three programs.	ALL MEDIUM TERM

APPENDIX I

Briefs Received from Provincial Associations

- Co-operative Housing Federation of Canada - Ontario Region
- Ontario Association of Non-Profit Homes and Services for Seniors
- Ontario Non-Profit Housing Association

Co-operative Housing Federation of Canada
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December 15 1999

Response to the Draft Report of the Joint Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing

CHF Ontario Region appreciates the opportunity to respond to the draft report of the Working Group, and to have had the chance to meet with committee members on December 7. This document is a revised version of the report previously distributed to the Working Group. It attempts to clarify our position in a number of key areas, and to integrate some key points of discussion between the co-op representatives and the committee members present on December 7.

We regret that the Working Group does not include representatives from social housing providers. We believe that the work of the committee would have benefited significantly from a better understanding, at an earlier stage of the process, of the special nature of community based social housing.

The possibility that a municipal initiative to harmonize the income testing functions of the three programs might lead to a system of centralized RGI administration in any or all CMSMs is a serious concern to co-op members. Their voices have been heard in a number of consultations and deputations on the social housing reform process since the spring of 1998. Co-ops are also concerned about the possibility of more municipal control over waiting list functions, beyond the current Co-ordinated Access systems. In the area of RGI administration and waiting list management, co-ops want to preserve their current mandate to:

- provide efficient, dignified service to all their members and applicants
- maintain the autonomy of their community-based, volunteer-led organizations
- ensure accountability of public funds.

Since the co-operative structure puts us in the position of representing both the users and managers of social housing, we feel we have some unique perspectives and concerns to present to the committee.

Most of our comments relate to the issue of income testing, since this is the area facing the greatest potential change. Co-ordinated Access systems are already in place, though in various forms and stages of development. Co-ops will want to be involved in the evolution of these systems under municipal administration.

The report: areas co-ops can support:

- The co-op sector agrees with the statement early in the main report that it is inappropriate to fund social housing through property taxes.

- We believe that the report reflects sincere concerns on the part of members of the Working Group about the challenges of municipal administration in the area of social housing.

- We support the approach of the suggested vision statement for the development of a service delivery system. The statement includes:
    - excellent service to clients
    - achievement of program objectives
    - efficient business processes

- Co-ops also support the report's recommendation that the following principles should guide the development of local service delivery systems:
    - Accessible
    - Respectful
    - Individual
    - Responsive
    - Open
    - Flexible
    - Fair
    - Accurate
    - Efficient

- We are pleased that the report encourages CMSMs to involve stakeholders in the process of determining the best approach to service delivery.

- We agree that the Province should retain responsibility for ensuring provincial standardization of the nature of the income-test and the basic rent/housing charge payable by RGI households.

- Co-ops support the need for a review of some of the financial testing rules and policies in order to ensure consistency, simplification, fairness and transparency. The working group charged with this task must include co-op housing providers. Such a review must acknowledge the differences in objectives amongst the three programs.

- ☐ Co-ops would welcome more opportunities for training and resource material development in the area of subsidy administration. The Province has provided very little training in RGI administration. There has been no consolidation of information on policy changes or administrative developments. The RGI administrative manuals have not been updated for years. The co-op sector has played a significant role in trying to fill this gap and has provided training on RGI administration through its network of local federations.

- ☐ We also appreciate that there might be benefits in the standardization of forms, and the streamlining of reporting procedures. We support the recommendations in these areas.

The report: areas of concern for co-ops:

- ☐ Unfortunately, the report relies on some key assumptions that are either unproven or erroneous. These are:
  - that integration of income testing will probably lead to operating efficiencies
  - that clients would be better served by a municipally integrated system
  - that there are significant numbers of people using more than one of the three programs.

  We believe that these flawed assumptions may promote an approach that is contrary to the spirit of the stated vision and principles of service delivery. We address these assumptions in more detail later in this response

- ☐ The report makes some broad and somewhat misleading assumptions about the state of Co-ordinated Access systems across the province:
  - it suggests that Co-ordinated Access Centres exist in all areas and are responsible for most intake and waiting list functions. Many areas do not have a central point of entry for applicants. All providers are entry points to different degrees.
  - not all Co-ordinated Access systems manage a centralized waiting list. This is not a minimum requirement of the current program.

- ☐ The language used to describe RGI administration misses the mark in terms of reflecting what community based housing was set up to achieve. The report sets RGI households apart as recipients of a public service. Co-ops have had a less bureaucratic and more inclusive approach to housing charge assistance administration. This approach has contributed to the broad support for community-based social housing over the last quarter century.

- The treatment of RGI households as personal recipients of public assistance (like Ontario Works, or OW) is contrary to established practice and principle in the funding and governance of community-based social housing. Co-ops view the RGI subsidy as integral to their business operations. This stream of revenue allows co-ops to fulfill their mandate of providing mixed income affordable housing. The funding arrangement is clearly set out in the co-ops' operating agreement with the Province.

- The report does not adequately address the contractual relationships between the RGI households and the co-op. The housing and subsidy agreements are between the member and the co-op, not the member and the funding agent. These agreements are governed by the co-op's by-laws, the *Co-operative Corporations Act,* and the operating agreement with the Province. For example, section 171.6 (3) of the *Co-op Act* specifically requires that "procedures for awarding subsidies to individual members must be procedurally fair". The report of the committee does not address these existing legal obligations for co-ops and how they might be affected by changes to the subsidy system.

- The report tends to obscure a key difference in objectives amongst the three programs. Co-op housing is a permanent form of housing developed in response to the economic reality that the market does not provide decent affordable housing for a large portion of society. Co-ops are a permanent choice of housing for most co-op members, subsidized or not. Ontario Works recipients are clearly in receipt of short-term, emergency support, and the allocation of child care subsidy is inevitably limited by the age of the children served. In contrast, RGI housing, once allocated, is not limited or time constrained, but dependent only on the household's financial circumstances. Co-ops are not trying to move their residents off subsidy or out of the community. Members have security of tenure within the authority of the co-op's by-laws and the *Co-operative Corporations Act.*

- The draft recommendations are disappointingly focussed on negative aspects of RGI administration:
  - the potential for fraud
  - the need to share personal information across programs mainly to prevent inappropriate use of government subsidies.

  This emphasis on fraud prevention may be seen to feed into the undeserved negative public stereotype of persons on subsidy. It may reinforce the stigma of social housing which community-based providers have worked so hard to eliminate.

- We question why CMSMs need to have access to all RGI files. The province has recently reviewed all the projects and is in the process of conducting a further round of operational reviews. In addition, every co-op has an annual audit, which is submitted to the Ministry. Aside from the administrative burden on co-op staff and boards of such an exercise, difficult issues related to the providers' obligations around confidentiality of personal information come into play.

Harmonization and centralization: the co-op response :

- The Working Group indicated that it feels that the concerns expressed by co-ops are based on a mistaken assumption that harmonization and integration necessarily mean centralization.

- We understand that the report does not recommend one model of service delivery, nor does it push for centralization of RGI or waiting list functions. The reasons for our concerns are as follows:
  - full or partial centralization of administration is an aspect of the majority of the six scenarios put forth in the report, and is a key part of two of the three models used in the focus group consultations with social housing providers
  - CMSMs will have the flexibility to choose a model of service delivery that may include centralization of RGI and waiting list functions.
  - the report of the Social Housing Committee (November 1998) clearly equated integration of the income testing function with centralization. Recommendation #38 says "CMSMs may achieve administrative efficiencies in centralizing this function across the three programs."

- If the report of the Working Group is not supportive of centralized systems or the assumption that there are efficiencies to be found here, it should say so. Co-ops want this option off the table.

Implications of centralized RGI administration for co-op -members :

- **A new reporting relationship for most RGI households:**
  - Fewer than 30% of RGI households in co-ops are currently on social assistance. A significant number of those households are recipients of ODSP, which is provincially administered. Therefore, a centralized municipal system would be a new and unwelcome experience for more than 80% of RGI households (i.e. the working poor, disabled persons, seniors and students).

- ☐ **Stigma:**
  - The stigma and hassles of welfare are such that many low-income co-op members who qualify for OW prefer to manage on their meagre employment income rather than face the welfare system. These households would be particularly demoralized by a centralized municipal subsidy system.
  - Co-ops are not saying that their members don't want to line up, or rub shoulders, with people on welfare because we think we are better people. We are (in part) those people. We are saying that :
    - ➢ municipal welfare offices are generally not welcoming places, despite the efforts of municipal officials to ensure clients are treated with respect
    - ➢ public attitudes to those on social assistance have traditionally been harsh in North America, and have increasingly hardened in Ontario in the past few years
    - ➢ the growth of "snitch" lines, the tightened eligibility requirements for social assistance and the enhanced enforcement powers of welfare officials have added to the public stigma.
  - The co-op office is not exclusively used for, or associated with, RGI administration. It is the hub of community and business activity in the co-op. Members using the office feel neither stigma nor the uncomfortable scrutiny of the public.

- ☐ **Service Issues:**

  We believe that members are best served on site, for the following reasons:
  - There are no transportation problems.
  - There is discreet, individualized and consistent attention by a staff person known to the members. This is especially important in cases of poor literacy, language difficulties, disability etc.
  - Members needing regular reviews (temporary income, rent forgiveness situations etc.) would be particularly inconvenienced by an off-site location.
  - Co-op offices almost always offer evening hours, at least once a week. Working members might have difficulty accessing CMSM offices that maintain normal business hours.
  - The RGI income review process can be an opportunity for other information sharing, community support, etc.

- ☐ **Privacy issues:**
  - Members have serious concerns about confidentiality of information. Broad information sharing across programs may be seen as a threat to individual privacy and dignity.

Efficiency and cost effectiveness:

☐ Where's the proof?

- There is no proof that the current system is less effective or more costly than an integrated or centralized system.
- A modified form of centralized RGI administration was tried, tested and then dropped about twenty years ago. It was used in the provincial rent supplement program for the early federal co-ops and limited dividend projects in Ontario in the mid-1970's. The approach was not very efficient or timely, and the job was eventually delegated to the housing providers.

☐ Value of the current system:

- The co-ops and non-profits built under provincial programs since the mid-1980's have a fully developed capital and operating infrastructure which lends itself to continuing to provide a full range of housing services for residents and applicants. We have furnished offices, sophisticated computer systems, and experienced staff and boards.
- We provide a continuum of services from application to long term accommodation to move-out. Much of the work is done by volunteers.
- We are familiar with the legislative and corporate structures that govern our operations.
- Co-ops have a history of building solid communities through a meaningful self-management system. Co-op members have shown a high degree of satisfaction in their housing, and have contributed stability and pride to the larger community.
- RGI administration is an integral part of the continuum of service. Removing that part of the service from the provider makes no sense in terms of effective community-based management, or potential for cost-savings. It would fragment current administrative systems, enhance the possibility of duplication of tasks and create an additional level of involvement between the provider and the municipality.
- The final report of the Working Group should advise CMSMs of the need to develop an approach to service delivery that respects the management structures communities have chosen.

☐ Likelihood of increased inefficiencies:

- We believe that a municipally integrated or centralized system will have difficulty keeping up with the frequent changes in household income and composition. This will compromise the accuracy and timeliness of the calculations and payments.

- RGI administration is closely tied to other rent/housing charge functions (budget setting, rent/housing charge collection, arrears control, etc.) which are the responsibility of the co-op. Separating these functions will inevitably lead to inefficiencies. For example, housing charges for all co-op households often include non-subsidized items in addition to the basic payment, such as cable TV costs and parking. The amount of these charges is specific to each project, so the involvement of the provider in setting the rent/housing charge is essential.
- A centralized system of income testing would have to be co-ordinated with each co-op's overall financial timetable, since the annual income review task is integrated into the co-op's budgeting and year-end responsibilities. It is unlikely that the timing of income testing across the three programs could ever respond to the individual timetables of each social housing provider (as well as any child care provider). A centralized municipal system is bound to undermine the integrity of the housing provider's established financial, administrative and reporting schedules.
- We believe that centralized income verification would mean less effective monitoring of financial or other changes in RGI households. Members may feel less pressure to declare income changes to an outside body.

☐ Increased municipal cost and liability:

- The significant number of new clients, currently not part of municipal services, would present an additional burden to municipalities.
- Centralized systems of arrears repayment are not realistic and unlikely to be effective. Is the municipality going to take responsibility for compensating the co-op for lost revenue if the collection efforts fail? How would a centralized approach address the co-op's legal responsibilities for arrears management and the eviction process? Co-ops have specific rules for eviction under their by-laws and the *Co-operative Corporations Act*. Members have recourse through the courts, an added protection for co-op members not found in the provisions of the *Tenant Protection Act*. Is the municipality going to pick up the cost of co-op evictions when collection efforts fail?

☐ Fraud prevention:

- Fraud is a concern to everyone. We believe it is more likely to be discovered if income testing is carried out by the co-op, which is familiar with the household's circumstances.

- The potential for fraudulent activity and collusion by boards of directors and/or staff is generally prevented or limited by provisions in the co-op's by-laws and the *Co-operative Corporations Act*:
    - ➢ all co-ops are governed by the conflict of interest provisions of the *Co-op Act*
    - ➢ all provincial program co-ops have implemented even more stringent internal conflict of interest by-laws over the past few years
    - ➢ most co-ops have codes of conduct for boards of directors
- Co-ops understand that they are accountable to their members and to the general public. Incidents of poor behavior usually come to light relatively quickly because of the inherent transparency of operations in small community- based housing organizations. The co-op sector has had a successful record of working with co-ops and the funding agent (the Ministry) to correct any breaches.

Feedback from Co-ops at the Focus-Groups:

We have heard from co-op staff and members who attended the four regional focus- group sessions. These are the key points:

- ❑ There was overwhelming support (not just from co-ops) for the current model of RGI administration and access, with some improvements in such areas as staff training, forms development and reporting. It was assumed that CMSMs would take on an audit role similar to that currently played by the Province.

- ❑ Of the three models offered for discussion Model 1 was the most acceptable, it being the closest to the current model.

- ❑ Participants felt that CMSMs should make a business case to demonstrate that there are opportunities for efficiencies from centralized income testing.

- ❑ Social housing providers are very concerned about the possibility of residents being stigmatized by an integrated municipal subsidy system.

- ❑ Social housing providers feel that CMSMs need to become more familiar with social housing, and vice versa.

- ❑ CMSMs need to understand the principles of co-op management.

- ☐ Co-ops and other social housing providers are extremely concerned about a broad range of issues related to their security and viability in the context of municipal downloading.

Conclusions:

CHF Ontario believes that the current system of RGI administration and waiting list management in housing co-operatives has a proven track record of efficiency, good service and public accountability. These qualities are consistent with the Working Group's vision statement and guiding principles for a service delivery system. Any attempt to make drastic changes to the current model must be based on a cost-benefit analysis and customer service research. We agree that there are aspects of the current system that could and should be improved, and the co-op sector would like to be part of that process. But we believe that the removal of such key administrative functions from the provider to a centralized bureaucracy is contrary to the principles of effective community-based social housing, and would be a regressive step. We hope that your final report to the Provincial CMSM Advisory Group will reflect our concerns.

OANHSS
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December 13, 1999

Bob Cooke, Co-Chair
Joint Municipal/Provincial Working Group
on Financial Testing and Access to Ontario Works,
Child Care and Social Housing
56 Wellesley St. East, 12th floor
Toronto, Ontario
M7A 1E9

Dear Mr. Cooke:

On behalf of the members of the Ontario Association and Non-Profit Homes and Services for Seniors (OANHSS), I would like to provide you with comments on the draft consultation document entitled *Report of the Joint Municipal/Provincial Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing*.

OANHSS is a province-wide organization that has represented non-profit long term care facilities, seniors housing, and community service agencies for over 80 years. Members are respected and recognized for their dedication and commitment to quality care and services, and for the active and integral role they play in the communities they serve.

Your working group's draft report, released in October 1999, provides a number of options in the continuing discussions regarding income testing for a variety of services that are being devolved from the provincial level of government to the municipal level of government (specifically the Consolidated Municipal Service Managers or CMSMs).

The consultation draft clearly signals the intention to leave decisions about income testing and access to the individual CMSMs. While our members would prefer to have province-wide standards on these issues, we recognize that the final decision on the issues of income testing and access will eventually rest with the CMSMs.

Our concern is that by providing CMSMs with options only regarding income testing or income verification, and not including recommendations, the province is disregarding the best interests of seniors who live in non-profit housing. Seniors who are currently non-profit tenants want to keep the positive relationship and trust they have built up with their non-profit housing staff when discussing personal financial information.

Our message to the authors of this consultation draft is that **the most efficient scenario for providers of seniors non-profit housing, tenants and municipal taxpayers is to have the income verification functions remain with the individual non-profit seniors housing providers**.

We would ask that your final report, which is expected in February 2000, clearly conveys this message.

One of the key themes in the consultation draft is that many of the tenants in social housing also either apply for or receive services/benefits from Ontario Works/social assistance or from child care programs. This is clearly not the case for seniors in non-profit housing. Seniors do not access the other two "social" services being delivered by the CMSMs - the potential benefits of "one stop shopping" do not apply in the case of seniors housing.

OANHSS was pleased to see that the consultation draft did recognize some of the concerns and perspectives which seniors' housing providers and tenants have with respect to centralizing income verification with CMSMs:

a) Non-profit corporations are capable of acting in the best interests of vulnerable people and will deal sensitively with clients (p.39).

b) CMSM income verification will increase the number of organizations and individuals that tenants must deal with - the social housing provider is already interacting with tenants on an ongoing basis - there is a service relationship which already exists - tenants may find it easier to always have one point of contact (the provider) for all rent related issues (p.43).

   OANHSS would like to stress that this point is especially accurate in the case of seniors non-profit and seniors supportive non-profit housing as a very close relationship, with a high degree of trust, develops between staff of non-profit providers and the residents.

c) Seniors would be uncomfortable having to appear at the "welfare office" (Ontario Works) in order to have their income verified for social housing purposes (p.13) – many seniors receive OAS, CPP, and GAINS and do not consider these pensions to be welfare – strong sentiments are expressed by such individuals about their self-sufficiency.

We would like to further stress that in many situations, seniors rely on staff and there may be a duplication of effort as a non-profit staff person may be needed to help a senior compile and explain the necessary documentation to CMSM staff even if the official streamlined approach would have the senior supply information directly to the CMSM.

We hope that the joint provincial/municipal working group recognizes the special relationship of seniors with their non-profit housing providers and recommends a system where seniors non-profit housing providers retain the income verification functions.

OANHSS wishes to be part of the continuing dialogue on these important issues for the providers and the residents. We would like to have further input to discussions by this joint provincial/municipal working group. We will also continue to encourage our members to work with municipal staff and politicians in the 47 CMSMs.

If there are specific seniors social housing issues you would like to discuss with our organization or our members, please do not hesitate to contact Debbie Humphreys, Director of Communications at 905-851-8221 extension 233.

Sincerely,

DA. Rubin

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Chief Executive Officer

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Submission to Municipal/Provincial Working Group on the

Draft Report on Financial Testing and Access - Ontario Works, Child Care and Social Housing

January 17, 2000

OVERVIEW

This submission to the Municipal/Provincial Working Group supplements the feedback ONPHA, and our members, have made directly in our meetings with Working Group members.

It reflects the major themes and questions raised by non-profit housing providers throughout the province.[1] ONPHA members tested the Working Group's key assumptions and recommendations against their day-to- day experience as managers. They looked at the probable impact of the recommendations on their non- profits, on housing applicants, and on tenants.

The key questions

The Working Group's Draft Report explores the opportunity social housing devolution has created to harmonize administration of Ontario Works, child care and social housing. It looks at opportunities for realizing cost efficiencies and improving services to clients of the programs, while assuring local taxpayers of best value and fraud prevention.

To meet these goals, the Report describes some models of municipal administration which propose a *horizontal integration* of a function common to all three programs. But there are cost and service implications of this direction.

Social housing is now a *vertically integrated* housing service. Social housing tenants now enjoy an "at home" service, that combines financial-testing with other housing services, and housing providers integrate rent-geared-to-income administration with all other operations. Pulling the financial testing function out of provider's operations to achieve a horizontal integration of this single function at the CMSM level will result in a partial dis-integration of housing services for both providers and tenants.

Therefore, ONPHA members returned to the key questions that launched the Working Group's Report:

On financial testing integration, they asked:

- Will it create improvements in services to clients?
- Will it create efficiencies/savings for the CMSMs?
- Will it increase costs/losses for providers?

They also looked at:

- Landlord/Tenant legal issues

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[1] ONPHA represents 692 non-profit providers that own and manage 96,846 housing units. Our members responded to the Working Group's draft report through:

1. 13 ONPHA-sponsored regional meetings and locally organized housing provider network meetings
2. four focus groups organized by the Ministry of Municipal Affairs and Housing
3. an ONPHA Conference workshop led by the Working Group's co-chairs
4. ONPHA's Ad Hoc Committee on Financial Testing and Access, representing a cross-section of ONPHA membership.

ONPHA members appreciated these opportunities to contribute to the report, and strongly support the Draft Report's recommendations that housing providers b

- Contracting out of financial testing
- Disputes and appeals on RGI matters

On the **further centralization of the access function**, they asked:

- Will accessibility be improved?
- Will there be extra costs?

They also discussed **information sharing and fraud prevention**.

Key conclusions on financial testing integration

In considering these questions, housing providers reached some key conclusions:

- **Integrating financial testing will not improve service for most tenants.** Only 16% of Ontario's RGI tenants receive Ontario Works. Integrating these services will offer no benefits to the remaining 84% of social housing tenants, for whom financial testing is a one-stop, "at home" service.
- **There may be little or no savings providers can pass on to CMSMs.** The financial testing function is integrated into the day to day management of most providers, the majority of whom are small. Removing this function will not cut their operating costs, or create savings that can be passed on to the CMSM. Instead, providers may experience delays (and thus rental losses or extra administrative costs) resulting from the double handling of tenants' financial files, given the sometimes critical timing involved in filling vacancies and avoiding arrears.
- **There may be additional costs for CMSMs,** who will take on the administrative burdens and costs for *all* RGI tenants, not merely the 16% they now see.

Key conclusions on access integration

- A CMSM integrated access service will add to municipal costs, yet may realize little or no savings from providers' operating costs. Many providers are paying only a modest fee to support Co-ordinated Access, (some are paying nothing) and contributed services have been essential to keep operating costs low.
- Co-ordinated Access has been developed by housing providers in most parts of the province using diverse models that respond to local needs and conditions. This dynamic process can continue to evolve with the CMSM as a partner.

Recommendations

1. ONPHA endorses the draft report's Recommendation # 1 " That each CMSM involve its own staff and all stakeholders in order to develop a vision statement and design and delivery principles for the three programs." CMSMs will be able to draw on the diverse community sponsorship and volunteer base which, for the last 25 years, has created and operated non-profit housing. The administration of the social housing program by the CMSMs can then build on the recent service improvements to clients in Co-ordinated Access and the best management practices of providers.

2. Changes to the financial testing and access functions in non-profit housing should only be considered by the CMSM after a business case has been developed which demonstrates that money will be saved (without raising another's costs), tenants will be better served and efficiency improved.

3. ONPHA endorses the report's recommendations that further work on financial testing, access and RGI 'rules' undertaken by joint provincial/municipal work groups should include consultation with housing providers.

FINDINGS OF ONPHA MEMBERS
on the Draft Report on Financial Testing and Access - Ontario Works, Child Care and Social Housing

INTEGRATION OF FINANCIAL TESTING

1. **Will it create improvements in services to clients?**

- For 84% of social housing tenants, the answer is almost certainly no. According to the Draft Report, only 16% of Ontario's RGI tenants also receive Ontario Works. (The number of RGI tenants also receiving child care subsidies is unknown.) The remaining 84% already have "one-stop shopping"-- an "at home" service with their housing provider for all the information needs and administration of their housing and RGI services. The resulting extra stop in the RGI process if integration proceeds will not improve service for these tenants.

- It is not clear service would improve even for the 16% of social housing tenants who also receive Ontario Works. Their incomes and eligibility are already determined by Ontario Works, and the provider does not duplicate this work.

- For *all* tenants, there are concerns with dealing with two organizations, rather than one:

  - They may experience frustration at delays and confusion that can result when two organizations are involved, and files are "double-handled." The double handling arises because the income, subsidy and rent calculations are inter-dependent and the required information for the same tenant is split between two different organizations. Delays are a particular concern around move-in time, when tenants are anxious to know whether they will have a place to move to.

  - Existing tenants experience ongoing income verification. The need to travel to another location, especially for those without convenient transit, or facing the obstacles of language, physical disability or mental illness, will present a decline in service.

  - Some tenants are on monthly adjustments of income and rent depending on the type and source of income. For these tenants especially, quick access and turn around, and getting answers to questions, is essential. Having to deal frequently with both the provider and a central organization would be experienced as a decline in service.

  - Furthermore, the long waiting lists for housing mean that detailed financial testing is only done at the time that a unit is being offered. Given the very different timelines for approvals in the three programs, it seems unlikely that fewer forms will be used or time saved by virtue of a tenant's involvement in other programs administered by the CMSM.

2. **Will it create efficiencies/savings for the CMSM?**

- There will be added costs and administrative burdens for the CMSM in taking on new clients in a different program, given that 84% of them do not overlap with Ontario Works clientele.

- These extra costs are unlikely to be offset by sufficient savings in the subsidies paid to providers. The financial testing function is integrated with day-to-day management, and is only one topic during tenant contacts.

Almost 75% of ONPHA members have 100 or fewer units, and half have less than 60 units. Especially for these small and medium size providers, it would be difficult to identify or implement operating cost savings that could reduce CMSM subsidies.

- In fact, double-handling files could increase costs. There could be greater potential for errors by both parties. Centralized financial testing could also reduce the opportunity housing managers, with their day-to-day knowledge of tenants, now have to detect and prevent housing fraud.

- There may be less expensive ways to benefit from third party verification or information sharing than centralizing the complete function. For example, provider errors might be reduced by the simplification of the 'rules' and the provision of ongoing information and training in RGI administration which has not really been systematically provided by the province.

3. **Will it increase costs/losses for providers?**

- In the social housing business, timely and accurate information and documentation are essential to prevent vacancy and arrears losses, and to prevent operational cash flow problems. For example, a one day delay in turning around income information can result in a month's vacancy loss, or an incorrect subsidy amount applied for that month.

  Any changes (such as double handling of files) that increase the potential for delays or errors in critical information should be very cautiously examined.

- It can be complex and time consuming to explain the rent to a tenant, given the integration of income and rent calculations, particularly for those needing special support. Further, there are individual unit variations in extra charges for items such as utilities, parking, cable TV, and laundry. When changes to calculations occur, the provider may be placed in the intermediary role, making it more awkward and time consuming in dealing with the tenant if there are two organizations involved.

4. **Landlord/Tenant legal issues**

- Further legal work needs to be done, but providers cautioned that, in law, the sole landlord is the provider. The provider therefore has the right, and the obligation, to ensure that information flow and tenant documentation is maintained and accurate.

- Cases of eviction for arrears, misrepresentation of income, or other causes, and the judgements against tenants for repayment of arrears can be heard by the Tribunal or the courts. The integrity of the documentation and the ability of the landlord's representative to testify to its completeness is critical.

- This may be more difficult where another organization is handling an essential component of that documentation, namely the financial testing of the RGI tenant. The legal definition of rent for a tenant receiving RGI assistance is the amount they are required to pay, not the market rent of the unit. Disputes over the amount, or changes to their entitlement and the timeliness of notifications of changes can all be parts of the legal case.

5. Contracting out of financial testing

- 29% of ONPHA members contract with property management firms (some of which are other social housing providers) to undertake property management functions, of which RGI administration is an integral component. Regardless of whether employees or contractors perform these functions, the primary accountability of the provider to the RGI funder is through the Board of Directors.

- If CMSMs were to require approval for the financial testing contractual arrangements in advance, clear lead times and turn around for approvals must be established, since the entire property management function is at stake in the contract. It would also help if there was a requirement that approval not be unreasonably withheld.

- Because of the integration of the function with day-to-day management, refusing permission could result in higher costs since the provider would have to make separate arrangements, and further fragment tenant services.

6. Disputes and Appeals on RGI matters

- More work needs to be done in this area, and housing providers would like to be part of that process.

- CMSMs could mandate a clear, fair internal review process. The CMSMs can then satisfy themselves through audits and annual information reports that the 'rules' are being followed and that the internal review process is fair and in place.

FURTHER CENTRALIZATION OF THE ACCESS FUNCTION

1. Will accessibility be improved?

- In the last several years, providers have been through the process of consulting, developing and implementing a Co-ordinated Access approach. These are not always 'Centres' as such, but rather a system that maximizes points of access, uses standardized forms and a single assessment of eligibility and co-ordinates the referrals to individual providers.

- Co-ordinated Access systems are diverse, flexible and responsive to local community concerns, applicants' needs and providers' resources. Here are two examples:
    - Toronto's system has 230 access points (the member providers), plus 16 access centres where data is processed and applicants can get central information and help making their application in 68 languages. All are linked, with good connections with community and social agency outreach workers who can access the system at any point.
    - In North Bay's system, every provider is also an access point. There is no central office; applicants are assisted at any location, and a central 'filing cabinet' data processor sends providers monthly lists of the applicants who have chosen their housing, and a central waiting list that identifies the total numbers seeking housing.

- Co-ordinated Access systems are dynamic operations, able to evolve and respond to changing conditions. In some places, work is already proceeding towards a completely centralized waiting list and access system. In other cases, a very decentralized access approach is preferred, with a good central data and referral component.

- Because they are established by the providers and are not seen as a 'government department' they often involve contributed services from both housing providers and community organizations. For example, in Toronto, providers and community agencies they work with can provide access to interpretation in 68 languages at no extra cost to the Access system.

2. **Will there be extra costs?**

- Many providers pay only a modest amount or nothing to the Co-ordinated Access system. Generally operating costs have been kept low, relying on contributed services and co-ordination for as much of the 'cost' as possible–a benefit not always available to government-run systems. The CMSM might have to incur most or all of the costs of establishing a more centralized function.

- Vacancy losses, incurred by delays filling vacant units, are always a top concern for housing providers. These losses could increase if a more centralized system resulted in a slower process for matching willing applicants with appropriate vacant unit.

INFORMATION SHARING / FRAUD PREVENTION Improving the flow of information, and preventing fraud, can be achieved without completely centralizing financial testing. Utilizing computer links from central data bases to individual providers could significantly enhance information sharing and fraud prevention.

  - Improving the flow of information back to the provider on RGI applicants and tenants from the appropriate government departments might be very cost effective.
  - Third party verification processes can be incorporated without wholesale system changes.
  - Information sharing across the entire province on housing arrears would help to prevent re-occurrences with other providers.
  - As previously discussed, housing managers can often observe and respond to signs that a tenant's circumstances have changed or may have been misrepresented.

- Some proposals in the report are problematic:
  - A common client identifier number would be practical only where the CMSM provided key information systems and technology platforms that were consistent for all providers.
  - Requiring providers to increase rents (by decreasing the RGI benefit) as a means to reimburse benefits from other CMSM programs involves legal issues on the definition of rent. More importantly, increasing rents could result in the tenant falling into arrears, losses to the provider and ultimately economic eviction.

- Housing providers have observed that the real problem is often errors or lack of familiarity with the rules on the part of tenants, particularly where language, disability or mental illness is involved. Tenants may respond more quickly to interventions by the provider, thus ensuring that an error is corrected before it might be seen as 'fraud' by a centralized office.

APPENDIX II

LIST OF PROVINCIAL ASSOCIATIONS WHICH RECEIVED COPIES OF THE CONSULTATION DRAFT

APPENDIX II

LIST OF PROVINCIAL ASSOCIATIONS WHICH RECEIVED COPIES OF THE CONSULTATION DRAFT

Association of Day Care Operators of Ontario

Association of Early Childhood Educators of Ontario

Association of Municipalities of Ontario

Corporate Housing Federation of Canada - Ontario Region

Home Child Care Associations of Ontario

Ontario Association for Non-Profit Homes & Services for Seniors

Ontario Association of Family Resource Programs

Ontario Coalition for Better Child Care

Ontario Municipal Social Services Association

Ontario Non-Profit Housing Association

APPENDIX III

TERMS OF REFERENCE

APPENDIX III

RATIONALIZATION OF FINANCIAL TESTING FUNCTIONS

TERMS OF REFERENCE

November 23, 1998

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Provincial-Municipal Services Realignment
Social and Community Health Services Implementation Project

I. PURPOSE

The purpose of this project is to develop a strategic approach to the streamlining and rationalization of the financial testing function across three social services program areas - Child Care, Ontario Works, and Social Housing.

II. INTRODUCTION

In the area broadly known as 'human services' (primarily health, education and social services), some services require the user to undergo a financial test of one type or another to determine the amount of government subsidy that is appropriate.[2] Some of these programs are:

- Ontario Works
- child care
- rent geared to income (RGI) housing
- Ontario Disability Support Program
- Handicapped Children's Benefits
- GAINS (A) income support for the elderly
- student assistance
- legal aid
- long term care
- drug benefits

From time to time, there has been interest in examining the prospects for rationalization across all these programs. However, until the recent consolidation of municipal social and community health services, there has never been a clear focal point or driving force to make such a broad undertaking practicable.

With the advent of local services realignment, a driving force for the beginning stages of rationalization appears to have been created. Specifically, 37 municipal governments in Ontario have been selected, and 10 District Social Services Administration Boards (DSSABs) are being created, to be responsible for the efficient delivery of 3 programs; Ontario Works (OW), Child Care

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[2] In order to ensure that terminology is used consistently, Appendix A provides working definitions (e.g. income test, needs test).

(CC), and Rent Geared to Income Housing (RGI). Each of these municipalities and DSSABs are, by legislation, proceeding to fulfil the role of Consolidated Municipal Services Manager (CMSM) for the 3 core programs.

Local governments have a compelling interest in rationalizing these financial tests, given their considerable financial stake. Municipalities contribute to the costs of each program as follows:

- OW - 20% municipal share on allowances; 50% on administration
- CC - 20% municipal share
- RGI - 100% municipal share

Decisions as to which services have a test, the purpose of each test, the specific design of each test and how it is administered, have been made independently for each service. This leaves great potential for increased rationalization i.e. any change that moves towards one or more of the following features in a financial testing system:

- Removal of differences in the features of a test (the rules) between one program and another, whenever there is insufficient policy rationale to support a difference.
- Streamlining the administration of the tests:
- Information is captured once and can be used for eligibility determination and subsidy calculations for a number of programs.
- A reduced number of points of contact for the person seeking information and/or access to one or more financially tested services.
- Standardized business practices and technology to achieve administrative and/or program efficiencies (e.g. reduced staff, reduced fraud).

Removal of Differences in Features

As mentioned above, one type of rationalization is the removal of the difference in the design features of a test (the rules) between one program and another, whenever there is insufficient policy rationale to support a difference. Some differences in rules between financial tests for each program are to be expected, to the extent each program has different objectives. For example, Ontario Works is a program of last resort for people in serious financial difficulty. Ontario Works is not designed as a program to provide ongoing support to the working poor - those with jobs at low wages relative to their family size. RGI housing, like child care, is designed for a larger group of people than those on social assistance; RGI is actually intended to reach the working poor, and by virtue of subsidizing their rents, help them to remain in the labour market. As well, about one-third of the social housing portfolio is currently occupied by seniors.

The interaction of the tests raises another set of design issues, namely, how to achieve policy coherence in which each program supports the objective of the other as much as possible. For example, when the same person is receiving a subsidy from all three programs, how quickly should the subsidies go down as earnings go up? If each program reduces its subsidy too quickly, the person is actually worse off for every extra dollar they earn.

The province will undertake a preliminary inventory of the design issues before deciding on the nature and scope of any formal policy reviews. Accordingly, these terms of reference concentrate on the delivery of the financial tests.

The Delivery (Administration) of the Financial Tests

The remaining types of rationalization pertain to how the financial tests are actually administered and are the focus of these terms of reference. At present, there appears to be considerable scope for increased rationalization, given the large number of municipalities, child care operators and social housing providers involved in the administration of financial tests. As of January 1, 1997, there were about 1500 different organizations administering one or more of these tests. Each entity has been permitted a great degree of flexibility in determining its own business processes (such as client intake and follow-up), forms, verification processes, training, method of assigning client identifiers, information systems, computer technology, etc.

The historical status of each entity is on the verge of major change, as the new service management system provides for only 47 CMSMs to take on the responsibility of achieving an efficient delivery system. There is an opportunity for streamlining and reducing the number of financial testing processes. In some cases, benefits can be maximized by all CMSMs moving to one overall system for the entire province; in other cases the benefits can be achieved even if each CMSM sets up its own unique system.

III TYPES OF RATIONALIZATION

Eight types of possible administrative rationalization have been initially identified for OW, CC and RGI:

- each CMSM establishes one point of intake
- each CMSM utilizes one grouping of staff to carry out financial testing
- each CMSM follows one set of business process e.g. (income verification)
- one common set of forms is used by all CMSMs
- one common client identifier is used by all CMSMs
- one set of business processes is used by all CMSMs
- one technology system is used by all CMSMs
- one set of basic "building block" client information elements is collected by all CMSMs

While all these types of rationalization are theoretically possible, practical advice and recommendations on the extent of change which is appropriate will be products of this project. Additional types of administrative rationalization may also be identified and analysed. Compliance with freedom of information legislation governing municipalities will be an important consideration throughout the analysis.

The first three types of rationalization listed above require each CMSM to arrive at its own conclusion about staff deployment and business processes. In that regard, the report of the project team should be designed as a practical guide to all CMSM's as they develop a vision for the delivery of their legislative mandate.

The latter types of rationalization involve some combination of a clear CMSM consensus on a particular approach, and a provincial preparedness to use its influence and/or authority to achieve a consistent approach across all CMSMs. Each of these types involves significant decisions and requires a certain amount of detailed design work to ensure that all the related issues are identified and resolved (e.g. compliance with MFIPPA legislation). Accordingly, the part of the report that speaks to province-wide solutions should culminate in options and recommendations with clear responsibility centres and time lines for action.

IV STAFFING

A working group with representation from each of the program areas and the municipalities will be established to analyse the existing systems, develop options for streamlining and rationalization, and prepare a report.

It is recommended that the working group consist of staff as follows:

- MCSS - Business Transformation Project
- MCSS - Child Care
- MMAH - Staff from policy and operations (number TBD)
- SCHSIP - Social and Community Health Services Implementation Project

At least three municipal staff would be invited to participate in the Working Group and would be appointees approved by AMO, working in conjunction with OMSSA.

V TIME COMMITMENT

It is expected that staff are expected to devote about three days per month, on average, to the work over a nine to twelve month period and the organizations donating staff should be notified accordingly.

This is a multi-ministry, multi-municipality project with various forums for review and approval. Accordingly, it is difficult to prescribe precise time lines. Once formed, the working group would prepare detailed work plans. The milestone dates for these work plans would tentatively be as follows:

- October - terms of reference approved
- November - staff appointed to working group and work plans developed
- December to May - analysis
- Summer - preparation of report
- September - draft report

VI AUDIENCE FOR THE REPORT AND STAKEHOLDER INVOLVEMENT

Social housing providers will be invited to join a reference group which will be asked to provide advice on various issues identified by the working group members during the course of their work.

It is assumed that the audience for the report is primarily municipalities and social housing service providers. The report would be reviewed by the Social and Community Health Services Management Group, and the Social Policy Deputy Ministers. It is expected that the report would ultimately be sent to all CMSMs. Certain recommendations are expected to help them plan the most efficient approach to financial testing in their jurisdiction.

The provincial Directors of each of the program areas and selected senior municipal staff would be called upon to act as a forum for initial review of the draft report.

APPENDIX A

TERMINOLOGY AND DESIGN FEATURES

A knowledge of basic terms is important in order to understand the nature of the work proposed. Key terms with regard to financial testing are as follows;

- financial test - any test that requires the use of a government service to provide personal financial information in order to determine eligibility, or the amount of public subsidy for the individual
- needs test - a test that compares assets and income to the needs of the family/individual. The resulting surplus or deficit is used to calculate public subsidy
- income test - a test that relies primarily on the income of the family/individual to calculate public subsidy
- means test - a test that includes not only assets, income and needs, but also the potential of the family/individual to provide for themselves (e.g. a spare room that could be rented out for income)
- public subsidy - the total cost of the services minus the amount paid by the user of the service
- user fee - the amount the user of the service is responsible to pay

The basic design features of the financial tests for the three programs are as follows;

- Ontario Works uses a needs test. The deficit is the amount of financial assistance to be paid. A surplus means the family/individual is not eligible for assistance.

- Child Care uses a needs test. Income is compared to budgetary need to determine a family's "available income" to cover child care fees. Families whose available income is not sufficient to cover child care fees may be eligible for a partial or full child care fee subsidy. Apart from the results of a needs test, other (municipal or operator) user fees may apply.

- RGI uses an income test. The user fee (rent) is typically 30% of household income. The balance of the cost is a public subsidy.

APPENDIX IV

MAP OF CMSM BOUNDARIES

APPENDIX V

PRESENTATIONS MADE TO THE WORKING GROUP ON RATIONALIZED FINANCIAL TESTING

APPENDIX V

Presentations made to the Working Group on Rationalized Financial Testing

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DATE	TOPIC	PRESENTER(S)
9/2/99	*Backgrounder on Social Housing*	David Clarke*, Manager Non-Profit Housing Branch, MMAH, David Priebe*, Senior Policy Advisor, Housing Policy Branch, MMAH
9/2/99	*Child Care Program Overview*	Gayle Preston*, Director Child Care Directorate Ottawa-Carleton, Helen Kandiuk*, Policy Analyst, Child Care and Community Services Branch, MCSS
24/2/99	*An Overview of Ontario Works*	Rita McLean, Program Support Specialist, City of Toronto
24/2/99	*Business Transformation Project*	Jane Chapman*, Policy Analyst, BTP, MCSS
10/3/99	*Integrated OW and CC System Fee Subsidies*	Gayle Preston*, Director Child Care Directorate Ottawa-Carleton
10/3/99	*Freedom of Information*	Guy Herriges, Corporate Program Manager, Management Board of Cabinet
31/3/99	*Integrated Services Model; Halton Region*	Tanya Schlabitz Intake Record and Reception Services Manager, Harriette Beckon, Intake Caseworker, Halton Region
31/3/99	*Child Care Database Project*	Richard Franz, Project Coordinator, Child Care Unit, MCSS, Connie Wilson, Manager of Child Care Services York Region
14/4/99	*Consolidated Verification Process*	Shelley McCorkell, CVP Co-Project Manager, MCSS, Guili Pegolo Senior Business Analyst, BTP
14/4/99	*Information Sharing and*	Don Young, Manager,

	Fraud Control Unit	Alan Fletcher Program Analyst, Information Sharing and Fraud Control Unit, MCSS
28/4/99	*Peel Financial Assessment Unit*	David Swarc, Director of Social Assistance, Region of Peel
28/4/99	*Coordinated Access System and Modified Chronological Waiting List*	Frances Beard, Assistant CEO, Mary Menzies Manager of Toronto Social Housing Connections, Terry Skelton, Acting Director Community and Tenant Services, MTHA *Modified Chronological Waiting List*
12/5/99	*Toronto Internal Appeals Process*	Heather MacVicar*, General Manager of Social Services, City of Toronto
12/5/99	*Pursuing Available Income*	John Stapleton, Manager, Operational Policy Unit, Maggie Kelly, Income Maintenance Trainer, MCSS
12/5/99	*Social Benefits Tribunal*	Darlene MacDonald-Forsythe, Manager, Brenda Relf, Program Analyst, Program and Accountability Unit, MCSS

* Working Group members

APPENDIX VI

ACKNOWLEDGEMENTS

Appendix VI

Acknowledgements

The Working Group would like to extend its thanks for the support it has received from both individuals and groups through each and every stage of its work.

Our thanks go to those who made informative presentations during the early stages of our work. They are listed in Appendix VI.

The preparation of the Companion Report involved the expert input of staff from both CMSMs and the province, including Sonia Ernst of the City of Toronto's Community Services Department as well as Lisa Booth and Angela Pearson of the Ministry of Municipal Affairs and Housing.

We are grateful to David Sheridan of Sheridan Consulting Services, not only for the fine job of facilitating all the consultation sessions and reporting on the results, but for the helpful advice in planning all the logistics of such meetings.

The efforts of many staff from the regional offices of MCSS and MMAH were instrumental in generating the positive feedback received about the consultation sessions. With apologies to those who contributed 'behind the scenes' in each region and are not on the following list, our thanks go to the following:

- from MCSS- Ruth Bastin, Michael Bates, Gillian Berney, John Haist, Germain Lacoursiere, Nancy Madison, Trish Moloughney, Marie Richardson and Elizabeth Roy
- from MMAH- Al Bilan, Karen Brandica, Joan Crammer, Denis Desmeules, Chris Laundry, Keith Lucas, Dave Martin, Bob McKnight, Micheline Riopelle, Shirley van Steen and Yvonne Wright.

Special thanks go to the province- wide associations who took the time to canvass their membership and provide the written input which constitutes Appendix I. We are also grateful to the Ontario Regions' Social Housing Group for their written suggestions.

Our french translators, Helene Belanger, Louise Loyer and Francine Watkins worked diligently to ensure that the many technical terms, particularly in the Companion Report, were accurately captured.

Finally, the Working Group wishes to acknowledge the support staff at the Social and Community Health Services Implementation Project of MCSS. Their tireless enthusiasm throughout the past year has been evident in every aspect of their work. Thank you, Marguerite Fonseca, Waneta Ramsay and Tracey-Ann Richards!

APPENDIX VII

LIST OF WORKING GROUP MEMBERS

APPENDIX VII

MEMBERS OF THE JOINT MUNICIPAL/PROVINCIAL WORKING GROUP ON FINANCIAL TESTING AND ACCESS TO ONTARIO WORKS, CHILD CARE AND SOCIAL HOUSING

Members Appointed Through the Association of Municipalities of Ontario

Carl Ross (Co-chair)
Administrator
Department of Social Services
County of Dufferin

Glen Obrecht
Director
Social Services Administration
Regional Municipality of Peel

Mark Fisher
Chief Administrative Officer
Parry Sound District Social Services
Administration Board

Carrol Garvey
Director
Muskoka Community Services
The District Municipality of Muskoka

Heather MacVicar
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City of Toronto

Gayle Preston
Director Child Care Directorate
Social Services Department
Regional Municipality of Ottawa
Carleton

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David Clarke
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Ministry of Municipal Affairs & Housing

Helen Kandiuk
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Child Care & Community Services
Branch
Ministry of Community & Social Services

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Team Lead

Deb Ballak
Policy Analyst

Bev Wolfus
Policy Analyst

Peggy MacKenzie
Policy Analyst

Staff Support from the Social and Community Health Services Implementation Project

Marguerite Fonseca	Waneta Ramsay	Tracey-Ann Richards

A DESCRIPTION OF BUSINESS PROCESSES

COMPANION REPORT

TO THE

REPORT OF

THE JOINT MUNICIPAL/PROVINCIAL

WORKING GROUP

ON

FINANCIAL TESTING AND ACCESS TO

ONTARIO WORKS, CHILD CARE

AND SOCIAL HOUSING

March 2000

A DESCRIPTION OF BUSINESS PROCESSES

COMPANION REPORT
TO THE REPORT OF THE JOINT MUNICIPAL/PROVINCIAL WORKING GROUP ON FINANCIAL TESTING AND ACCESS TO ONTARIO WORKS, CHILD CARE AND SOCIAL HOUSING

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SECTION I

INTRODUCTION

This report is a detailed description of three programs: Ontario Works, child care, and social housing. To anyone with a desire to know more about these programs, it has utility as a standalone document.

However, it was actually written as a support or companion document to another report entitled A *Report of the Working Group on Financial Testing and Access to Ontario Works, Child Care and Social Housing.* The Working Group Report examined the potential to improve delivery of the financial testing and access functions, and makes a number of recommendations. ***This Companion Report is important 'pre-reading' relative to the Working Group Report.***

The purpose of this Companion Report is to provide a basic understanding of each program by:

1. outlining the rules (regulations or directives) which govern the financial testing function of the program; and
2. describing the accompanying business processes employed by the providers of the services, to carry out the rules.

It is believed that this is the first time in which each of the three programs has been juxtaposed in such a way, to allow an immediate comparison.

One of the first things the reader will notice is the wide variation in the level of prescriptiveness among the programs, which is reflective of different characteristics. For example, Ontario Works does not have limits on the number who can be assisted.

On the other hand, child care and social housing have always been restricted by the availability of finite funding to provide child care subsidy or social housing units. With this limited service capacity comes a necessity to balance:

- the need for a province wide framework of rules to ensure reasonable access
- with the need for local discretion in developing policies and delivery procedures which meet the unique features of each municipality, community, or housing project.

The 'rationed' programs, child care and social housing, pose a challenge in terms of accurately representing the business processes which are practiced throughout the province. Child care has historically been a discretionary program for municipalities, and where municipalities chose not to participate, fee subsidies were delivered through approved corporations.

This resulted in approximately 200 fee subsidy managers in the province of Ontario. These fee subsidy managers ranged from approximately 23,000 subsidized spaces in the City of Toronto, to small approved corporations meeting the needs in their rural communities. The task of recording business processes was compounded in child care by the amount of discretion which is allowed in the financial test under the Day Nurseries Act.

In order to give the reader as accurate a picture as possible of how financial testing is completed in the child care program in Ontario, the rules have been cited from the Day Nurseries Act. Guidelines and Directives for the Day Nurseries Act have recently been completed and these have been used to indicate where provincial regulations are in place. Where there are no regulations, this is indicated, and where there is general knowledge about how a process is commonly carried out, this has been identified.

The challenge of fairly representing general business processes for financial testing becomes more onerous in Social Housing. The reader who is unfamiliar with this area will want to refer to Part A Sections III and VI of the Working Group Report, to fully understand the number of social housing providers and the range and scope of their operations.

A number of Operating Agreements exist within this program, which also impacts on how this program is delivered and the difficulties of arriving at any business process 'generalities'.

Social housing program experts in the Ontario Housing Corporation and the Non-

Profit Housing Division were consulted, and their respective directives and guidelines used to give the reader a reasonably accurate synopsis of how the financial testing function is conducted. Those with experience in the program will undoubtedly know of many instances where practices diverge from the process described. For the purposes of providing a basic understanding of the financial testing function, unfortunately, many of the excellent initiatives and innovations of providers, of all sizes, could not be included.

It is important to remember that the mandate of the project is to concentrate on the *financial testing* component of the three programs. In Ontario Works, financial eligibility receives equal weight with the applicant/participant's efforts to find employment (where appropriate). Failure to meet this employment requirement can result in termination of assistance as immediately as failure to report income. The emphasis on employment assessment and support is not given its due consideration in the business processes, due to the limitations in the scope of this project.

The current OW business processes are described as they were conducted at the time of writing, (as they were in the other two programs). However, at the time this report was written, plans for the future delivery model of the Ontario Works program were undergoing significant changes under the Business Transformation Project (BTP). Although every effort has been made to reflect the future OW delivery model as accurately as possible, the reader should be aware that some changes may yet be made.

The commitment of staff and resources in both the child care and social housing programs, to assist their clients/residents with information and referrals toward self-sufficiency, often without a direct mandate to do so, must also be recognized as an important feature of each program.

SECTION II

DESCRIPTION / DEFINITION OF BUSINESS PROCESSES

This Companion Report contains many of the Directives or Regulations which govern the three programs under study: Ontario Works, Child Care and Social Housing. The business processes by which the rules are enacted are also described. In order for the Companion Report to be easily understood and consistently interpreted, the following table defines/describes each major term and/or its related business process.

Business Process	Description / Definition
PART II: Intake and Initial Screening	
II (a) INTAKE AND INITIAL SCREENING	Gathering information needed to make a determination of eligibility for a program. The extent of this determination varies from OW which may complete an entire application at this point, to Social Housing which requests just enough information to determine eligibility to be put on a waiting list.
II (b) WAITING LIST MANAGEMENT	Describes the flow or order in which names/cases are assessed and approved for the service, for example, first come first served.
PART III: Determining Eligibility	
III (a) CLASSES/ CATEGORIES OF ELIGIBILITY	Classes or groups of persons with similar circumstances which qualify them for the service/program.
III (b) VERIFICATION OF INFORMATION	How information given by applicant/client/tenant is authenticated, or supported, usually through providing official documentation.
III (c) CLIENT IDENTIFIERS	How each applicant/client/tenant of the program or service is uniquely recognized and recorded, manually or through an automated system.
III (d) AGE REQUIREMENTS	How the age of a person is verified to ensure they meet the age qualifiers of a specific program.
III (e) RESIDENCY REQUIREMENTS	How the place where a person lives, or has lived for a specified period of time is verified to ensure they meet the residency qualifiers of a specific program.
III (f) DEFINITION OF A SPOUSE	Outlines the process by which information is gathered to determine a cohabitant's spousal status; usually affects how this person's income is considered in the calculation of eligibility for assistance or subsidy.
III (g) INFORMATION VERIFICATION INTERVIEW	Outlines how information given by an applicant/client/tenant is authenticated to determine eligibility for the program; when and how this process is completed.

Business Process		Description / Definition
III (h)	ELIGIBILITY DETERMINATION / FINANCIAL TESTING	The process used to decide if a person qualifies for a benefit or subsidy according to the directives or regulations. Regulated (by program) financial calculation which establishes if the applicant/client/tenant qualifies for an allowance/subsidy and the amount.
III (i)	CALCULATING ASSISTANCE / SUBSIDY / RENT	How the amount of assistance for the program is determined. Each program has a prescribed formula for calculating the amount of benefit the recipient will receive.
III (j)	CAPTURING DATA	Obtaining information from the applicant/client/tenant which will be retained, and used for initial and continuing eligibility. Also how this information may be converted into a form which can be handled by a computer to extract and interpret it.
III (k)	TREATMENT OF ASSETS	Assets are defined, and maximums allowable are stated in the regulation/directive for each program. The process deals with how these assets are verified and affect eligibility for the program.
III (l)	TREATMENT OF INCOME	Income is defined in the regulation/directive for each program. The process deals with how the income is verified, how it is calculated, and its effect on eligibility for the program.
III (m)	TREATMENT OF EARNINGS	Earnings are defined in the regulation/directive for each program. The process deals with how earnings are verified, how they are calculated i.e. gross vs. net, exemptions etc, and the effect on eligibility for the program.
III (n)	TREATMENT OF SELF EMPLOYMENT / FARM INCOME	These types of income are defined in the regulation/directive for each program. The process deals with how this income is verified, how it is calculated i.e. gross vs. net, exemptions etc., and the effect on eligibility for the program.
III (o)	PURSUING OTHER INCOME AND ASSIGNMENTS	The requirement in the OW program to obtain any income which is available to the applicant/client. This process also deals with the municipality's ability to obtain this income from the source (third party) under certain circumstances.
III (p)	CLIENT NOTIFICATION	The methods by which each program informs its applicants/clients/tenants of decisions.
III (q)	DISPUTE RESOLUTION / APPEALS	The process by which the applicant/client/tenant is able to have a decision reviewed and a second decision rendered.
PART IV: Monitoring Eligibility		
IV (a)	VERIFICATION, UPDATES AND MONITORING	Outlines how information given by an applicant/client/tenant is authenticated to determine continuing eligibility for the program, i.e. when, frequency, how and where this process is completed.

Business Process	Description / Definition
IV (b) CALCULATING CHANGES TO BENEFITS / SUBSIDY / RENT	How the continuing amount of assistance/subsidy for the program is determined. Each program has a prescribed formula for reviewing this calculation, and how changes in the client/tenant's circumstances affect the amount of benefit to be received. These calculations are made according to the monitoring and client reporting requirements of each program.
IV (c) CASE MANAGEMENT AND TENANT/ MEMBER RELATIONS	This process describes the administration of the case on an ongoing basis, as well as the type and extent of liaison between the appointed staff and the client/resident.
IV (d) PROVIDING PROGRAM INFORMATION AND REFERRALS	The types of information which is provided to program applicants and clients when they present problems or concerns which do not fall under the mandate of that particular program.
IV (e) RISK ASSESSMENT TOOLS	Instruments used to indicate that a case should be reviewed since it poses elements of potential non compliance or violation of the rules of eligibility for a program (based on program experience with similar cases).
IV (f) CONSEQUENCES OF NOT REPORTING CHANGES	The sanctions imposed when information which is requested, and required, to maintain eligibility is not submitted.
IV (g) ONGOING CO-PAYMENT / RENT COLLECTION	The process to collect fees which are due for program services.
IV (h) AUTOMATIC LATE PAYMENT NOTICES	Describes the consequences of late payment of program fees for example, rent or partial child care payments.
IV (i) RECOVERY OF OVERPAYMENTS AND ARREARS	How money which is owing to a program is recovered from the client.
IV (j) CONSEQUENCES OF LATE CO-PAYMENTS / RENT PAYMENTS	The sanctions imposed when money owing to a program by a certain date has not been paid.
IV (k) EVICTION, CANCELLATION / REDUCTION OF BENEFITS / SUBSIDY	Describes the process followed when a decision has been made to terminate or reduce the assistance/subsidy, or in the case of Social Housing, terminate the tenancy.
IV (l) FRAUD REPORTING AND CONTROL	Fraud indicates criminal deception. The process for determining fraud in each program is described, including how the program processes information from third parties reporting potential fraud.

Business Process	Description / Definition
PART V: Administrative Procedures	
V(a) DECISION MAKING PRINCIPLES	Describes the fundamental assumptions/philosophy which govern the program.
V(b) STANDARDS, AUTHORITY, DELIVERY, PERFORMANCE MEASURES AND REPORTING	Outlines prescribed benchmarks which are designed to measure success both in terms of program objectives and delivery objectives.
V(c) FRONT LINE STAFF QUALIFICATIONS AND TRAINING REQUIREMENTS	Describes the formal and informal instruction required to prepare staff working with clients/tenants to properly execute their duties.
V(d) STAFFING RESOURCES	Describes the workload involved within the three programs i.e. how many cases is one staff responsible for, in any given business process.
V(e) OFFICE PROCEDURES AND MECHANISMS	Describes automated or manual administrative procedures which are in place to effectively manage the program.
V(f) STANDARDIZED FORMS	How data is collected on forms. The extent to which these forms correspond will facilitate their integration.
V(g) ACCOUNTABILITY MECHANISMS	Describes how, and the extent to which, service providers demonstrate to their funders that program and performance responsibilities were carried out properly.
V(h) PRIVACY REQUIREMENTS AND INFORMATION SHARING	The processes/mechanisms which the programs have in place to meet the requirements of local and provincial privacy laws. This section also looks at any mechanisms which allow the exchange of confidential data to 3rd parties.
V(i) STRATEGIES TO IMPROVE...	This section looks at initiatives in the three programs which are aimed at enhancing program objectives, and realizing them.
V(j) CAPACITY TO SHARE CLIENT DATA AND COMMON LINKAGES	The extent to which the programs have developed the ability to exchange client information and connect it with other programs or aspects of programs.
V(k) TECHNICAL PROCESSES: MANAGEMENT INFORMATION AND SYSTEM REPORTS	Automated processes developed to produce information reports to funders as well as management.
V(l) OPPORTUNITIES TO REDUCE DUPLICATION	This section observes areas in the matrix where processes may be combined/streamlined to decrease or minimize areas where tasks are performed repetitively.

SECTION III

GLOSSARY OF FINANCIAL TESTING TERMS

This section explains terms used in the descriptive program matrix; terms which may hold meaning specific to a certain program. Where the term applies to a specific program the program initials have been indicated e.g. if it is a term used predominantly in Social Housing (SH). Where there is no program indicated, the term has application across all three programs.

ACSD
Assistance for Children with Severe Disabilities. Provincially administered benefits program which replaced the Handicapped Child Benefit, in May 1998.

APPLICANT
A person who applies for or on whose behalf such an application is made for OW, CC or SH, prior to the granting or refusal of the application.

ASAP
Automating Social Assistance Project developed and implemented interim technologies OWT and CWT. (OW)

BENEFIT UNIT
Includes all those for whom benefits are being paid or subsidies being provided. (OW)

BF
Bring Forward: a system generated notice to a worker that is linked to a specific case and requires action.

BIOMETRIC INFORMATION
Refers to information derived from an individual's unique physical characteristics including voice characteristics, but does not include a photographic or signature image.

BTIB
Business and Technology Integration Branch. This branch consists of two projects; ASAP and BTP. (OW)

BTP
Business Transformation Project: a partnership between MCSS and Andersen Consulting to develop business processes and technology to support the reform of the social assistance delivery system.(OW)

CAC
Co-ordinated Access Centre: policies were developed by the ministry (MMAH) in consultation with housing providers and consumers to make it easier for people to apply for social housing (SH). They apply to all provincially funded social housing providers.

CAS
Childrens' Aid Society.

CFSA
Child and Family Services Act

CHF
Co-operative Housing Federation of Canada – Ontario Region (CHF Ontario Region) (SH)

CIMS
Comprehensive Income Maintenance System. A province-wide system which automatically performs budget calculations.(OW)

CIS
Client Information Sheet. A CIMS input document that is used to implement a decision, or to change data concerning a client's circumstances (OW).

CLIENT
Generic term for the user of the service.

CMSM
Consolidated Municipal Service Manager- the role of a CMSM is management of the delivery of Ontario Works, child care and social housing within their area, as well as administering cost sharing arrangements. They are also responsible for determining the most effective approaches to delivering services to clients in their area.

COMPLIANCE
The term used to describe whether or not a

participant is following the agreed upon terms of initial or continuing eligibility. (most commonly used in OW)

CO-OPERATIVE HOUSING (Co-ops)
Co-operative housing is a form of ownership in which housing is owned by a collective. Such co-operatives are termed not-for-profit because members do not own their housing individually and are not entitled to sell their membership for a profit. These incorporated associations provide housing to members, some of whom are low income households.(SH)

CPP
Canada Pension Plan

CVP
Consolidated Verification Process. Business process to assess and apply "risk factors" to cases in order to efficiently determine validity of ongoing eligibility. (OW)

CWT
Case Worker Technology: a computer application designed to run hand in hand with CIMS. Applications and updates for OW are completed on this system.(OW)

DATA CAPTURE
Recording the requested client information onto the appropriate fields within each window or screen.

DNA
Day Nurseries Act. Statute which governs the provision of child care in Ontario.

DOCUMENTS
All paper verification required to establish and maintain eligibility.

DSSAB
District Social Service Administration Boards are responsible for managing the delivery of Ontario Works, child care and social housing, as well as for administering cost sharing between the municipalities and the province.

EARNINGS
Income from employment. Used when referring to earned income as opposed to unearned income e.g. CPP.
EI
Employment Insurance
(replaces Unemployment Insurance).

ERO
Eligibility Review Officer: authority is to investigate eligibility entitlement for a past benefit period. (OW)

FBA
Family Benefits Act. Social Assistance legislation which is being phased out. Now being used only as authority to provide assistance to sole support parents pending their transfer to CMSM delivery under the OW Act.

FAMILY SUPPORT WORKER (FSW)
Workers who have prescribed powers and duties pertaining to pursuit of support e.g. the authority to collect and disclose personal information for the purposes of assisting in legal proceedings for support and in the enforcement of agreement, orders and judgements related to support. (OW)

FINANCIAL TESTING
Any test that requires the user of a government service to provide personal financial information in order to determine eligibility, or the amount of government subsidy for the individual.

FIPPA
Freedom of Information and Protection of Privacy Act

FOI
'Freedom of Information' is the right of access to information under the control of institutions in accordance with prescribed principles.

FRO
Family Responsibility Office is an office which locates missing support payers and processes of support payments which have been ordered under the Family Responsibility and Support Arrears Enforcement Act.

GAINS
Guaranteed Annual Income Supplement includes benefits for Disabled and Aged persons.
HOUSEHOLD
In RGI, a household means a person or group of persons who occupy a unit, meet the eligibility criteria for RGI households and pay rent based on

household income. (SH)

INCOME
In its broadest context 'income' is any payment made to or on behalf of an applicant or client. Each program defines how each type of income should be treated in calculating subsidies.

INCOME TEST
A test that relies primarily on the income of the family/individual to calculate public subsidy. (SH)

LHA
Local Housing Authority administers rent geared-to-income units for the Ontario Housing Corporation (OHC) in various municipalities and acts as the property manager. The boundaries of the 54 LHAs are being redrawn to reflect the 47 CMSMs. (SH)

LSR
Local Services Realignment involves a number of provincial initiatives; many leading to a more integrated and effective system of social and community health services under municipal leadership.

M-FIPPA
Municipal Freedom of Information and Protection of Privacy Act

MECA
Maintenance Enforcement with Computer Assistance

NCB
National Child Tax Benefit is a joint federal/provincial/territorial initiative begun in July 1998 to help parents keep jobs by improving the benefits and services available to them.

NEEDS TEST
A test that compares the assets and income to the needs of the family/individual. The resulting surplus or deficit is used to calculate public subsidy. (OW) (CC)

NON PROFIT
Each non-profit housing provider is an independent corporation governed by a volunteer board of directors. These non-profit corporations own and manage their own housing stock. The non-profit housing program is administered by the ministry according to the terms set out in operating agreements with each housing corporation. (SH)

OAS
Old Age Security: federally administered monthly payments to people over the age of 65 with low to moderate incomes.

ODSP
Ontario Disability Support Program-replaces parts of the *Family Benefits Act*. Monthly payments and employment services provided under the ODSP Act to people with disabilities.

OHC
Ontario Housing Corporation is the owner of many publicly-assisted rental housing units. OHC units accommodate families, senior citizens, disabled people, single persons and childless couples. These units are managed through its 54 Local Housing Authorities. (SH)

OMSSA
Ontario Municipal Social Services Association (CC,OW)

ONPHA
Ontario Non Profit Housing Association (SH)

OSAP
Ontario Student Assistance Program

OWA
Ontario Works Act

OWT
Ontario Works Technology: a tool to assist case managers to record and match participant's employment strengths and barriers with available training and employment opportunities. (OW)

PARTICIPANT
Refers to someone in receipt of financial assistance under the Ontario Works Act, who may be required to participate in certain employment related activities as a condition of receiving financial assistance.

When reference is being made to all people receiving subsidies under OW, CC and SH, the term 'client' is used.

PA
Participation Agreement is a contract between the participant and the social assistance delivery agent outlining their participation requirements under Ontario Works.

PIN
Personal Identification Number

PROCEDURE / PROCESS
The concrete steps needed to accomplish the intent of the regulation/directive/policy.

PRIMARY TENANT
Refers to people who are able to be housed independently i.e. head of household, single person etc. (See Part III (a) Classes/Categories of Eligibility page 8) (SH)

QPP
Quebec Pension Plan

R and R
Rights and Responsibilities are outlined in a form or brochure, part of the application process for Ontario Works clearly specifying the applicant's obligations while in receipt of OW.

RBC
Retroactive Budget Calculation refers to a budget calculation which is automatically performed whenever a change is input affecting a client's entitlement for a past benefit period. CIMS will automatically perform the budget calculations and produce RBC reports. The report details each month's recalculated budget.(OW)

RECIPIENT
A person who has been granted financial assistance under OW, or fee subsidy under CC. In SH, recipients of subsidy are referred to as tenants/ residents, or in co-op housing, as members.

REFERRAL
The process where an applicant or recipient/tenant is directed to another organization for services.

RGI
Rent-geared-to-income is the component of social housing which adjusts the rent paid by tenants to an affordable level, based on household income. (SH)

SECONDARY TENANT
Includes all members of a household with the exception of primary tenants. Most working children without dependants and who have never left the household are secondary tenants/members.(SH)

SIN
Social Insurance Number

SBT
Social Benefits Tribunal; which hears appeals of decisions made under the OWA and ODSP. (OW)

STEP
Supports To Employment Program-a feature built in to social assistance legislation which permits recipients to exempt a portion of their earnings from reducing the amount of assistance they receive. (OW)

TPA
Tenant Protection Act, 1997 is the provincial legislation which governs the resolution of landlord and tenant disputes, including rent increases and tenancy matters. (SH)

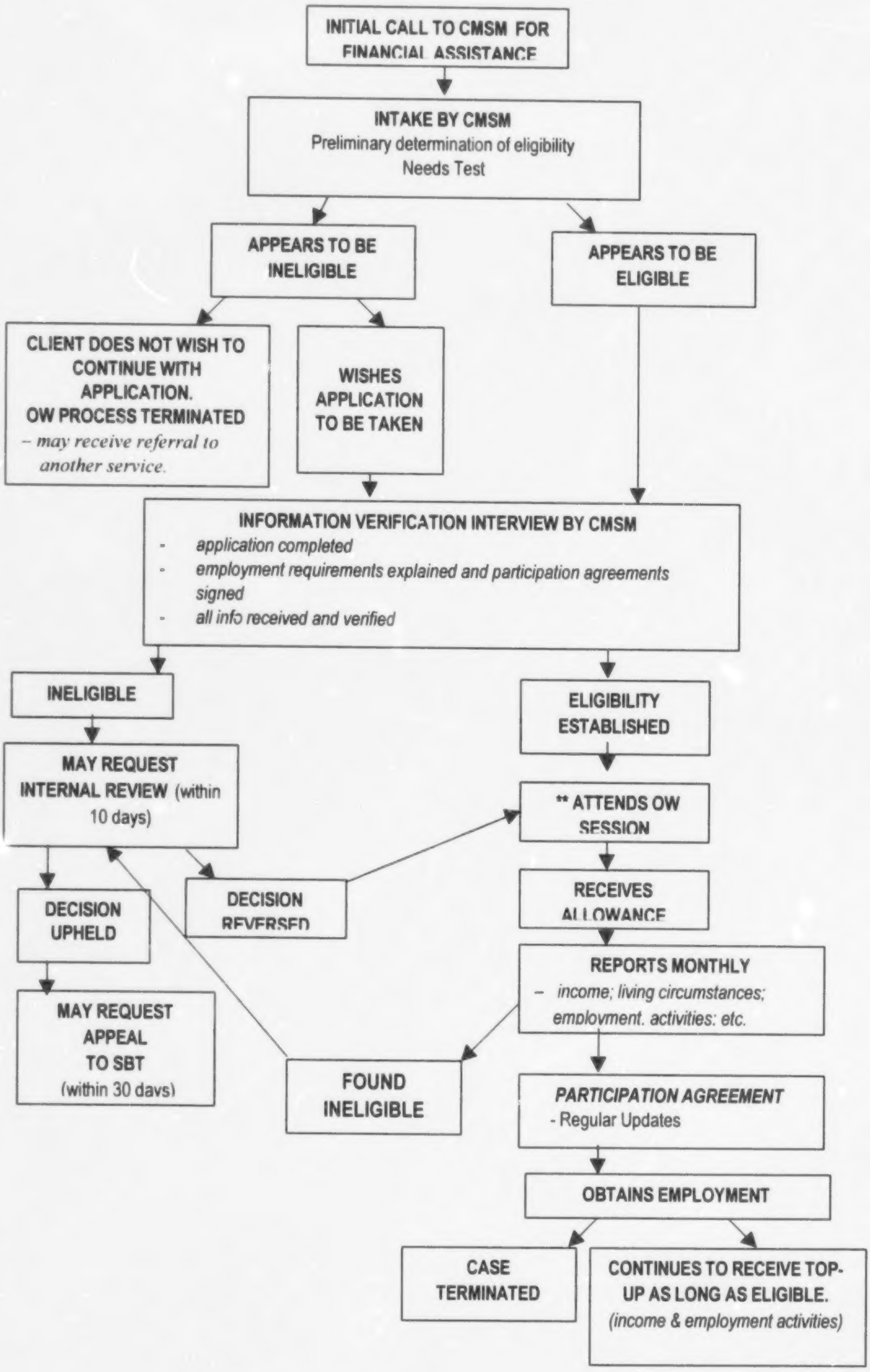
WSIB
Workplace Safety Insurance Board

WVA
War Veteran's Allowance

SECTION IV

MATRIX OF FINANCIAL TESTING AND ACCESS FUNCTIONS

ONTARIO WORKS
CLIENT FLOW CHART – Summary


INITIAL CALL TO CMSM FOR FINANCIAL ASSISTANCE
INTAKE BY CMSM
Preliminary determination of eligibility
Needs Test
APPEARS TO BE INELIGIBLE
APPEARS TO BE ELIGIBLE
CLIENT DOES NOT WISH TO CONTINUE WITH APPLICATION.
OW PROCESS TERMINATED
– may receive referral to another service.
WISHES APPLICATION TO BE TAKEN
INFORMATION VERIFICATION INTERVIEW BY CMSM
- application completed
- employment requirements explained and participation agreements signed
- all info received and verified
INELIGIBLE
ELIGIBILITY ESTABLISHED
MAY REQUEST INTERNAL REVIEW (within 10 days)
** ATTENDS OW SESSION
DECISION UPHELD
DECISION REVERSED
RECEIVES ALLOWANCE
REPORTS MONTHLY
– income; living circumstances; employment. activities: etc.
MAY REQUEST APPEAL TO SBT (within 30 days)
FOUND INELIGIBLE
PARTICIPATION AGREEMENT
- Regular Updates
OBTAINS EMPLOYMENT
CASE TERMINATED
CONTINUES TO RECEIVE TOP-UP AS LONG AS ELIGIBLE.
(income & employment activities)

This chart gives a broad overview of the steps an applicant must complete to apply for Ontario Works.

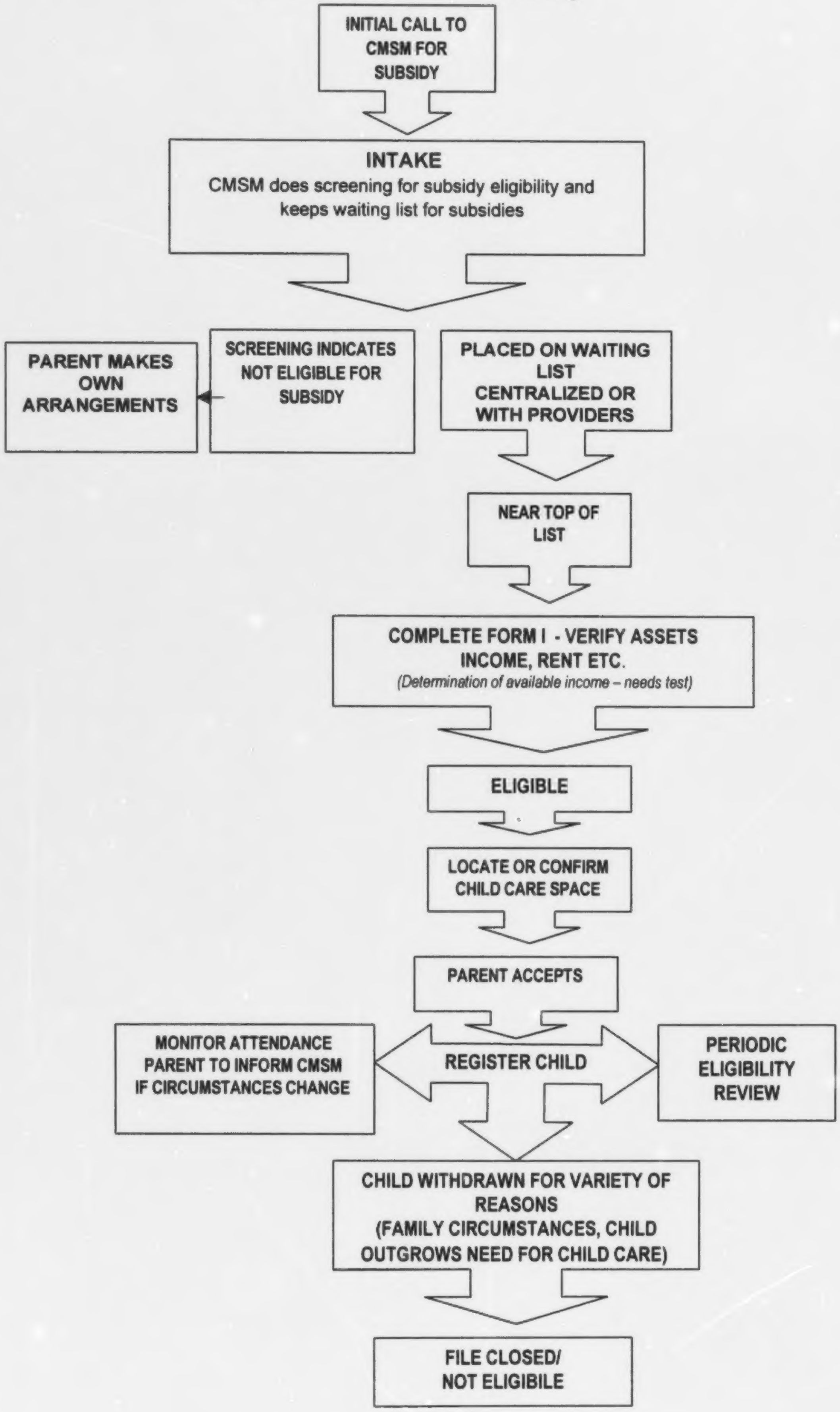
It represents a high level visual summary only, and in no way captures all of the elements involved in the application, eligibility determination and monitoring processes of this program.

* The amount of the application completed at intake stage varies with each CMSM

** In some CMSM's the OW Session may take place before the Information Verification interview, or at the one-on-one interview with the case manager.

CHILD CARE FEE SUBSIDIES

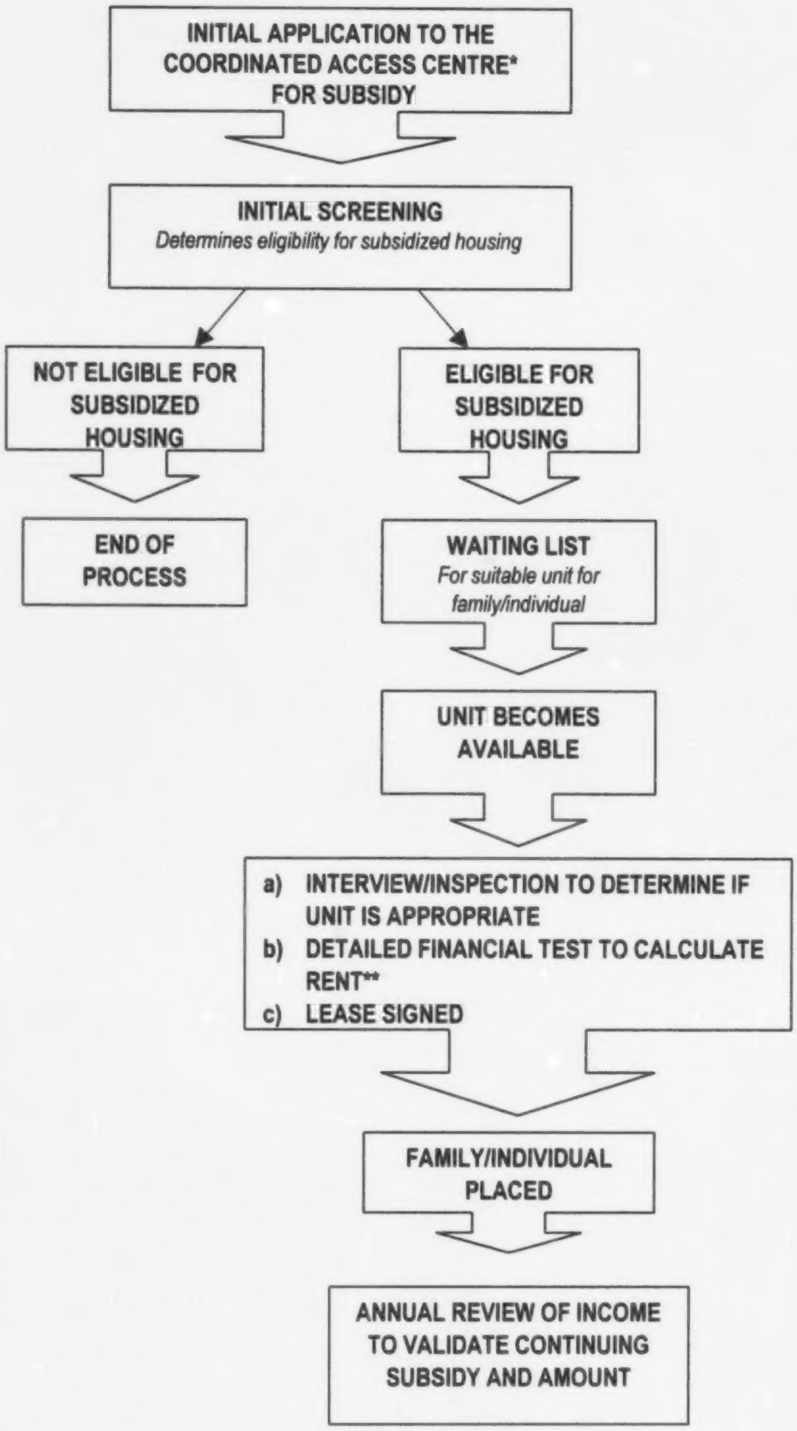
CLIENT FLOW CHART - Summary


INITIAL CALL TO CMSM FOR SUBSIDY
INTAKE
CMSM does screening for subsidy eligibility and keeps waiting list for subsidies
PARENT MAKES OWN ARRANGEMENTS
SCREENING INDICATES NOT ELIGIBLE FOR SUBSIDY
PLACED ON WAITING LIST CENTRALIZED OR WITH PROVIDERS
NEAR TOP OF LIST
COMPLETE FORM I - VERIFY ASSETS INCOME, RENT ETC.
(Determination of available income – needs test)
ELIGIBLE
LOCATE OR CONFIRM CHILD CARE SPACE
PARENT ACCEPTS
MONITOR ATTENDANCE PARENT TO INFORM CMSM IF CIRCUMSTANCES CHANGE
REGISTER CHILD
PERIODIC ELIGIBILITY REVIEW
CHILD WITHDRAWN FOR VARIETY OF REASONS (FAMILY CIRCUMSTANCES, CHILD OUTGROWS NEED FOR CHILD CARE)
FILE CLOSED/ NOT ELIGIBILE

This chart gives a broad overview of the steps an applicant must complete to apply for Child Care fee subsidies. It represents a high level visual summary only, and in no way captures all of the elements involved in the application, eligibility determination and monitoring processes of the program.

RGI HOUSING

CLIENT FLOW CHART – Summary


INITIAL APPLICATION TO THE COORDINATED ACCESS CENTRE* FOR SUBSIDY
INITIAL SCREENING
Determines eligibility for subsidized housing
NOT ELIGIBLE FOR SUBSIDIZED HOUSING
END OF PROCESS
ELIGIBLE FOR SUBSIDIZED HOUSING
WAITING LIST
For suitable unit for family/individual
UNIT BECOMES AVAILABLE
a) INTERVIEW/INSPECTION TO DETERMINE IF UNIT IS APPROPRIATE
b) DETAILED FINANCIAL TEST TO CALCULATE RENT**
c) LEASE SIGNED
FAMILY/INDIVIDUAL PLACED
ANNUAL REVIEW OF INCOME TO VALIDATE CONTINUING SUBSIDY AND AMOUNT

This chart gives a broad overview of the steps an applicant must complete to apply for Social Housing.

It represents a high level visual summary only, and in no way captures all of the elements involved in the application, eligibility determination and monitoring processes of this program.

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* CAC is a place where applicants can go to find out about the social housing in the area and complete a common application form. The site of the CAC has been chosen by the providers in the area.

** Income test administered by Social Housing provider of unit chosen.

IV. MATRIX OF FINANCIAL TESTING AND ACCESS FUNCTIONS

Part II (a) Intake and Initial Screening					
ONTARIO WORKS		**CHILD CARE**		**SOCIAL HOUSING**	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Each administrator shall: • *receive applications for basic financial assistance;* • *determine the eligibility of each applicant for basic financial assistance* • *carry out the prescribed duties;* • *ensure no applicant is denied access to request an application for assistance under the Ontario Works Act;* • *ensure that the information necessary for determining eligibility and making an application for assistance is explained to every applicant;* • *explain eligibility requirements;* • *advise all applicants of OW program parameters and emphasis on employment;* • *advise all applicants that eligibility will be determined by reviewing current budgetary needs and employment activities;* • *require information at intake including ; reason for application, name/DOB, address, family structure, age of family members, income (current/last), employment, assets, status in Canada, medical information, accommodation, willingness to participate in OW;* • *process requests for assistance in four days from the date of request, unless otherwise requested by the applicant; and* • *take no longer than 14 days from application to granting to make determination of eligibility from the point when the applicant has provided documentation*	Currently, Intake is the first point of contact for an applicant to apply for OW. The Intake process is primarily conducted through the telephone between the applicant and a worker. The worker can also access a province wide database. Intake steps include: 1. requests for application in person or by phone (phone intakes are most common and are encouraged by most delivery sites) 2. Intake information is taken by a designated worker who collects basic data 3. if applicant appears ineligible, they are advised, and can choose to continue the process. They are told of the right to have an application completed, and appeal procedure 4. verification interview is scheduled in the office or by a home visit 5. applicant is instructed to have required documentation ready for this interview **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: • participants/clients walking into a local office will have access to a phone in order to access Intake Screening Unit • the Intake Screening Unit will use an automated attendant to provide and handle program information and common inquiries. • designated Intake Screeners will take applications for assistance. • screeners will be supported with technology that will assist with analyzing all relevant information from applicants in order to make an accurate decision. Screeners will be notified by the system at any point in the screening process when the applicant is	*The process for client intake and initial screening is at the discretion of the CMSM.*	• the initial screening may determine whether a child is placed on the waiting list (where there is a waiting list) • parents will likely be informed of the eligibility criteria as part of the initial screening • information requested at the initial screening may include: family composition, ages of children, income and asset levels, identification ,address, child care needs in relation to school, work or participation agreements (OW), preferred location, requests for informal or licensed care • intake workers are staff who are knowledgeable about other community programs and often make referrals to other community agencies • information packages on eligibility and child care resources may be provided to clients who contact the CMSM • The information and referral service may be	*There is no financial test at this time –only statement of client income and eligibility is verified before client is put on wait list. See Part III (h) Eligibility Determination. There is no prescribed 'Intake Form' in the social housing program. Common 'Application Forms' have been devised by each Coordinated Access Centre, and are used by providers within each coordinated access area. The common application form must be easy to understand and contain sufficient information to be able to:* • *contact the applicant* • *determine if the applicant is eligible for social housing* • *determine if household income qualifies for RGI* • *know if applicant meets the criteria for special priority (abuse, urgent situations, special needs)* • *determine if applicant meets definition for groups disadvantaged by a chronological system (youth aged 16 or 17, newcomers to Canada, persons who are homeless)* • *determine size of unit required* • *list housing choices from which the applicant can select* • *include a Freedom of Information and Protection of Privacy Act (FIPPA)clause* • *contain a waiver to authorize forwarding application and attachments to housing providers selected* • *indicate that some providers may require additional information, if this is the case* • *have regard to the Human Rights Code* • *know if applicant, even if applying for RGI, is able and willing to pay market rent* *Once potential eligibility has been established, the applicant's name is put on a central waiting list for the housing projects the applicant expresses an interest in, and is eligible for, i.e. units for seniors, # of bedrooms and family size, handicapped etc. See Part III (a) Classes/Categories of Eligibility.* *COORDINATED ACCESS SYSTEMS SHALL have policies and procedures that are consistently applied so that households are able to apply for housing, in one location, and have their application assessed fairly and have their name placed on the waiting lists of the providers where they would like to live. Access*	• as of Jan. 1998 there are 'Coordinated Access' Centres which clients can go to, to receive information about social housing options in that area • there is a common application form, developed in the various areas, and the intake worker does an initial assessment to determine eligibility. There is a standardized form for this initial review: • information requested at the initial screening includes: status, income, previous rental history and general household information • intake workers vary in different areas but are often staff of the Coordinated Access Centre, or providers themselves, who are knowledgeable about other community programs and make referrals to other community agencies • clients may visit or phone the Centre to begin the

Part II (a) Intake and Initial Screening

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	ineligible. However the system will not prevent the screener from proceeding with the application. • when the application is complete, the applicant is advised if they appear ineligible. • ineligible applicants are provided verbal and written notice of the ineligible decision and internal review and appeal information. If there is other assistance from community agencies that may be of help to the applicant, the applicant will be advised and provided appropriate information. • the screener tells the applicant the list of documents that the applicant will be required to have for Intake verification. • Applicants are scheduled to the next point of contact (OW orientation session or Intake Verification Interview). • Intake screeners may initiate 3rd party interface checks for benefit unit members.		done by a community agency	*systems must ensure:* • *applications for RGI and market units are available and accepted at access points* • *assistance is given to applicants who need help completing forms* • *eligibility criteria are displayed in offices* • *hours, locations and physical environment suit the needs of applicants* • *disadvantaged and multi cultural groups are well served* • *information on application process, reviews, etc., are in plain language and appropriate languages other than English* • *a method for maintaining confidentiality of applicant information* • *procedures for handling applications from people who are abused which require written verification of a highly confidential nature* • *a review and appeal process for applicants who are told that they are not eligible for social housing* *Most coordinated access centres will follow a similar process:* • *OHC - LHAs will provide applicants with the Common Application Form that has been developed for use by housing providers within designated Coordinated Access Areas.* • *Incoming applications are to be dated and time stamped. Time stamping will enable the sequential ordering of applications received on the same day.* • *When applicable, applicants should be made aware of the tenant/member placement procedures for special groups. See Part II (b) Waiting List Management Relevant documentation will be required to establish whether applicants meet criteria above.* • *Non profits – each access system develops their own application process.* • *Receipt of applications should be acknowledged by the LHA. The acknowledgement should contain pertinent information e.g. dates used for selection purposes. Internal applicants who wish to move to a different location within the LHAs portfolio can submit an application and be put on the regular waiting list See Part II (b) Waiting List Management*	intake process

PART II (b) Waiting List Management

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
- *application to occur within 4 days of request for assistance* - *the process from initial application to granting assistance is no longer than fourteen working days, including four days to make a determination of eligibility from the point when the applicant has provided his or her documentation*	Efficient business practices are necessary to meet the requirements of the directives. Clients are seen and dealt with in chronological order (with the exception of crisis situations). Assistance is issued once the applicant has satisfied the requirements for documentation and eligibility. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: Business re-design offers opportunities to reduce duplication and automate cumbersome manual practices. For example: - completing intake information on application form (rather than duplicating from paper intake form). - Advising applicants with a complete application at Intake screening, of ineligibility, therefore avoiding unnecessary Intake Verification Interviews. - completion of application forms where the applicant is ineligible and does not wish to pursue the application.	*Each CMSM determines its own policies as to how it manages supply and demand (e.g. keeping a waiting list centrally or by program, by the CMSM or a community agency etc.)* *Where applicable, CMSMs need to establish and communicate their policy to inform parents and families on waiting lists regarding the criteria used to set priorities for the next eligible candidate for fee subsidy. These policies should reflect consideration of Ontario Works commitments, equality of access and community priorities.* *Learning Earning and Parenting (LEAP) participants are a priority for child care. According to MCSS policy, where OW child care fee subsidy is used, individual child care transition plans must be established to ensure that an OW participant moves to full time employment, child care assistance is available as long as the person is considered " in need " according to the Day Nurseries Act (DNA). Continuity of care for the child is assured.*	- if a waiting list is maintained, the eligibility test (Form 1) is generally not conducted until the parent nears the top of the waiting list, as the family's financial situation may change - demand often outstrips the supply and waiting lists are a way of managing the demand - in addition to waiting lists for fee subsidy funding, CMSMs may have waiting lists for child care spaces in specific programs Spaces may be located in: - child care centres, or private home day care agencies operated directly by CMSMs ; or - community based centres or private home day care agencies with whom the CMSM has purchase of service agreements Priority setting in CMSMs varies depending on the philosophy, demand and history of the child care program. Waiting lists can be 3-4yrs often depending on the age of the child, the number of children in the family or the geographic location. Some CMSMs do not have waiting lists due to a lack of demand for child care. Eligibility for child care programs is age based with child care programs licensed for specific	*A description of the Ministry's tenant/member selection process is as follows:* *The Modified Chronological Resident Selection System (MCRSS) is one from which applicants are selected based on:* - *the date the completed application is received* - *household income (depending on whether the available unit is RGI or market)* - *whether the applicant meets the criteria for overriding priorities i.e. persons who are abused, special needs or urgent situations* *MCRSS uses the date of application, overriding priorities and minimum targets to select the next applicant to be housed. The household with the earliest application date is selected as follows:* *1. Overriding Priority* *Mandatory* - *persons who are abused* *Optional* - *urgent situations (LHA mandatory as defined)* - *special needs (modified units, designated supportive housing)* - *internal transfers (due to over/under housing criteria and as per provider's transfer policy).* *2.. Minimum Targets* - *RGI households (OHC 100%)* - *highest need RGI households (OHC 75%)* - *groups disadvantaged by a chronological system (youth, newcomers, homeless)* - *households able to afford rent/occupancy charge at the market level (does not apply to OHC)* *3. Chronology* - *no overriding priority applicants* - *minimum targets met* *Selection of RGI and Market Rent residents:* - *a minimum of 50% of the units in a non-profit project are to be occupied by households requiring RGI (OHC 100%)* - *a minimum of 35% of the units in non profit projects, and 75% in OHC are to be occupied by those in highest need (defined as households who would spend more than 50 % of their income to pay market rent/occupancy charge of the unit in which they live (if they are currently living in the project) or for which they have applied.*	MAINTAINING WAITING LISTS Eligible- Applicants will be maintained on the active waiting list Pending-Applicants requiring further eligibility information to complete, will be classified as pending Inactive/cancelled-applications from applicants who: are no longer interested in housing; whose whereabouts are unknown and cannot be contacted; or are ineligible, will be maintained in an "inactive/cancelled" file. UPDATING ACTIVE WAITING LIST (OHC) - Each LHA will decide how often they wish to update information on applications on the waiting list - It is good practice to carry out full updates of applicant information as they near the top of the waiting list - Applications will be withdrawn from the active waiting list if the applicant requests a cancellation of the application - Applicants are to be strongly advised that they should contact the LHA with any information changes on their file, in particular, a change of address which may result in the LHA being unable to make contact when a vacancy becomes available. If a change in household occurs, the LHA must ensure that the unit size and location preferences are updated if required REFUSING AN OFFER OF HOUSING (OHC) - if a reasonable offer of housing is refused twice, for reasons that are considered by the LHA to be unjustifiable, the application will be cancelled. Should the applicant still wish to be on the waiting list, the application will be re-dated to the date that the applicant refused the second offer of housing. See Part III (q) Dispute Resolution/Appeals - when vacancies occur in units designated for supportive housing, the support service agency with whom the LHA has the supportive housing arrangement carries out the tenant/member

PART II (b) Waiting List Management

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
			age groups of children: Infants under 18 months Toddlers - 18 months and over up to and including 30 months Preschool- more than 30 months and up to and including 5 years School aged- 6 years of age and over up to and including 12 years Consequently there is a great deal of movement within the child care system as parents endeavor to find programs close to their homes, places of work or the elementary school which the child or siblings attend. As the several children in one family grow through the licensed age groupings it is often required that they move from one centre to another. Due to licensing requirements centres may not have a place for a child graduating from one licensed group to another. Families moving to a different home, parents changing jobs or siblings changing schools all may have an impact on the requirements of the child care program.	• *at least 10% of the total units in a portfolio are to be occupied by youth, newcomers to the country, and /or persons who are homeless (youth are defined as 16-17 yrs of age, newcomers are recent immigrants, including refugee claimants, who apply for housing within one year of entry into the country, homeless persons are, without shelter, using the emergency shelter system, or separated families due to lack of housing) (one in 10 vacancies in OHC go to these groups)* *SPECIAL PRIORITY FOR APPLICANTS WHO ARE ABUSED is to be given to an applicant whose personal safety, or whose family's safety is at risk because of abuse by someone with whom they live in a familial relationship. This special priority is to enable the applicant to separate permanently from the abuser. Due to the urgency of the situation the application is processed as quickly as possible. Once the provider has determined that the applicant meets the eligibility criteria for housing, and the applicant's situation has been verified by an appropriate verifier, Special Priority status will be assigned and the applicant will be given priority on the waiting list.* *INCOME TARGET RENT(OHC)* *To determine income target rents for all units in the portfolio, by unit size and community, in order to classify applicant households into one of the income categories, namely – RGI, high need and market.* *ABUSE (OHC definitions)* Any incident of physical or sexual violence, or words/actions/gestures which threaten ones person, children, family or property. To qualify for Special Priority, applicants must indicate that their personal safety, or the safety of their family is at risk. To qualify, an applicant who has been abused or whose family members have been abused: must have attained the age of 16; can be childless or have children; should indicate that s/he wants to separate permanently from the abuser. S/he need not present any form of legal separation with the application. *An application for housing under Special Priority Policy should be processed without delay. Once eligibility has been determined, and the abuse has been verified, staff are to assign Special Priority Policy status to the application and offer the applicant the next suitable unit that becomes available.* Where there is more than one Special Priority applicant for a suitable unit, the general approach should be to offer the unit chronologically. However, in situations where one of the applicants is still living with the abuser, this applicant should be housed first. In some situations, the Housing Authority may use their discretion to offer the next available suitable unit to the applicant household deemed to be at greatest risk.	selection for these vacancies. • For arrangements whereby the LHA has agreed to make a certain number of units available to a support agency, the LHA needs to determine the criteria by which vacancies will be offered to the support service agency. • In some areas the LHA may maintain the waiting list of applicants waiting for a supportive housing unit. The support service agency is to be involved in the selection of tenants/members for these units, to ensure the best match of support needs with the services provided. Each housing provider will decide if the coordinated access system will maintain their waiting list and/or select residents on its behalf. Whether these tasks are handled by the coordinated access system or the provider, the requirements must be met: • before executing a lease, income is verified and rent/occupancy charge calculated; • prior to occupancy, a lease is executed between the resident and the provider; • a strategy for filling market units is implemented; • accounting and other records are maintained; • waiting list, targeting, turnover and vacancy information is available to the providers Board; • program reporting requirements are met; • there is no requirement for a coordinated waiting list, although a number of areas have coordinated their waiting lists along with their access function; • when a name comes to the top of the list, and a suitable unit in a selected project becomes available, subject to the directives of the MRCSS, the housing provider/access centre contacts the client–clients self select, if they turn down a prescribed # of offers, they may be taken off the list • waiting lists can be several years long • waiting lists may be automated or kept manually Eligibility for SPECIAL PRIORITY: Special priority applicants would be identified early in the application process so they can be informed of

PART II (b) Waiting List Management

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
				If a Special Priority Policy applicant turns down two offers of housing their status is removed. TARGETS (The following represent OHC definitions of these targets) YOUTH- When one or more of the applicants meets the definition of youth at the time of application, the applicant household will be assigned Disadvantaged Applicant status. This status will be kept as long as one of the applicants meets the definition of youth, after which the status is removed. NEWCOMERS-Any household where one or more members of the household, at the time of application, meets the definition of newcomer (date of arrival in Canada is less than one year from the date of application), they will be assigned newcomer status. Households assigned Disadvantaged Applicant status in the Newcomer category keep this status for one year from the date the status is assigned. HOMELESS – Those considered homeless include: a household without shelter or living in temporary/emergency housing; a household living in substandard housing; a family separated due to lack of housing (this includes families whose children are in care of Child Welfare Authorities and will be returned if adequate housing is obtained); a person ready to be released from hospital or other care facility who cannot return to his/her former place of residence, or who has no place to go. URGENT NEED OF HOUSING - Some applicants may qualify as being in urgent need of housing. Circumstances where this may be warranted include (OHC): personal safety issues of an extraordinary nature where a member or members of the household are at risk; serious medical, health and/or social needs which would result in severe hardship or personal risk to the applicant if required to wait a prolonged period of time to access housing; LHAs will assign Special Priority, Urgent and Disadvantaged Applicant status where applicable, and record the date the status is assigned to the application. When selecting applicants on the basis of this status, LHAs will select according to the date this status was assigned to the applicant household. DISADVANTAGED APPLICANT STATUS FOR YOUTHS AND NEWCOMERS is assigned on new applications only. If a youth or newcomer joins an existing application, the application is not assigned Disadvantaged Applicant Status.(OHC) Applicant households who become homeless while on the waiting list will be assigned Disadvantaged Applicant status as of the date the homeless status is confirmed. If a homeless individual joins an existing application, while	suitable vacancies. Where a more detailed review is necessary to qualify an applicant for special priority for persons who are abused, the coordinated access system would implement a process which will assess an applicant's eligibility. Applicants eligible for SPECIAL PRIORITY STATUS for abuse include: • a woman or man (with or without children) who has been abused by a partner with whom she/he lives in a familial relationship and intends to separate from him/her permanently; • a senior who has been abused by a family member/caregiver; • a parent/guardian whose children have been abused by another member of the family. This Special Priority status allows applicants to move ahead of other applicants in need of affordable housing on a housing authority waiting list. Verifiers and housing authority staff must ensure that this status is reserved for only those who truly need it. To qualify for Special Priority, the applicant is required to submit a *Verification Declaration Form*, and a *Letter of Verification*, completed by a community service provider knowledgeable about the applicant's situation. This form contains the definition of abuse and indicators of abuse which verifiers are to use in determining an applicant's eligibility to obtain public housing under the Special Priority Policy. The applicant must also complete a *Consent and Notification form* (OHC form) which gives the housing authority permission to seek housing among other housing providers such as rent supplement landlords and Nonprofit/Co-operative housing providers, on behalf of the applicant. Decisions to interview a Special Priority Policy applicant should be made on a case by case basis where it would be beneficial to the applicant. The types of information that could be obtained in an interview include: confirmation of information on the application; determination of appropriate units to offer; discussion of special safety needs; consent for making

PART II (b) Waiting List Management

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
				continuing to meet the criteria of homeless, the application is assigned Disadvantaged Applicant status as of the date the individual joined the household. If the homeless individual decides to remove him/herself from the application, the Disadvantaged Applicant status will be removed from the existing application. *Where ARREARS of an applicant applying under Special Housing Priority Policy were incurred in a joint tenancy, the applicant will be assigned no more than 50% of the outstanding arrears. Repayment schedules, as a method of payment of arrears will be the standard practice in processing applications from these applicants.* *SELECTION PRIORITY (OHC)* *When selecting an applicant from the waiting list, offers should be made in the following order. Applicant households who are:* approved under the Special Priority Policy for applicants who are abused; deemed to be in an "Urgent" situation; assigned "Disadvantaged Applicant" status in date order, if the vacant unit is a 10th vacancy; in the "High Need" category by date of application, if the LHA is below the "High Need" portfolio income target; in the RGI category by date of application; in the Market Rent category by date of application. *APPLICATION DATE (OHC)* • *each member of a household who is not a dependant will be assigned a date of application. For new applications the date assigned to each person will be the date/time assigned to the incoming application.* • *when sorting applications in date order, the earliest individual household member will be the date used.* • *an applicant household with Special Priority status, those with Disadvantaged Applicant status, and those deemed to be in Urgent need will be assigned an additional date that the specific status, e.g. special priority, was applied to the application.* • *applicant households who change location preference within the LHA portfolio will maintain their original date of application for all location preferences.* *ARREARS from a former social housing tenancy must not be used to restrict access to housing for applicants applying under the Special Housing Priority.*	referrals to other housing providers; and establishment of a protocol for ongoing contact with the applicant. Special priority applicants are offered units based on the date this status is assigned, not based on income category. The assigning of URGENT status to an application is at the discretion of the LHA. The LHA is to assess each situation on a case-by-case basis to determine whether a household will be deemed to be in an urgent situation. The circumstances of the household's situation are to be well documented. Applicants who have market rent income who are not in special priority, urgent, or disadvantage categories would only be offered a unit if there are no other applicants in greater need (OHC).

Part III (a) Classes/Categories of Eligibility

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Financial assistance and benefits are paid to persons who meet eligibility requirements in one of the following groups: *1. people with participation requirements ;* *2. people temporarily deferred from participation;* *3. people under 18 yrs., with exceptional circumstances;* *4. aged persons over the age of 65 yrs. not in receipt of OAS;* *5. An adult providing temporary care to a child.* *Each group of persons must demonstrate budgetary need see Part III (i) Calculating Assistance, and meet requirements for participation in Ontario Works activities, unless specifically exempted*	Eligibility and budgetary need are fully reviewed and required documentation verified, see Part III (b) Verification of Information, and Part III (i) Calculating Assistance. PEOPLE WITH PARTICIPATION REQUIREMENTS, have, as their participation requirements with OW "the shortest route to employment" fully explained. They must also demonstrate that their current unemployment is beyond their control. Previous employment is confirmed by viewing the Record of Employment, and/or contacting previous employer(s). Where quit/fired is recorded, followup is done with the employer and applicant/participant. This applies to all employable adults in the benefit unit. PEOPLE TEMPORARILY DEFERRED FROM PARTICIPATION due to a medical reason are required to provide medical documentation regarding their disability, its length, and its impact on their ability to obtain employment. A modified employment plan may be made considering these barriers, and this status is monitored. AGED personal circumstances are investigated to ensure there is no support due to the applicant e.g. sponsorship, foreign pensions, etc. TEMPORARY CARE ALLOWANCE cases are assessed by viewing all income, assets or means of support available to the child. In some cases support may be pursued through the court. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: Verification of initial and ongoing eligibility will be supported by 3rd party interfaces to improve the quality of eligibility decisions.	*As stated in regulation 262 under the DNA, the province pays 80% of the cost of fee subsidies to CMSMs with respect to:* *Children whose parents are persons in need and who are in attendance at day nurseries or private home day care (ie must be in the licensed system)* *A PERSON IN NEED MEANS:* *1. A person eligible for income support under ODSP, FBA or OW or:* *2. A person who by reason of financial hardship, inability to obtain regular employment, lack of the principal family provider, illness, disability or old age, has available daily income (taking into account the liquid assets of the person), that is less than the daily cost of providing day nursery services or providing private-home day care to the person's children in accordance with Form 1* *A PARENT is defined in the DNA as a person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family.* *With respect to handicapped children in attendance at day nurseries or private home day care:* *A HANDICAPPED CHILD is defined in the DNA as a child who has a physical or mental impairment that is likely to continue for a prolonged period of time and who, as a result is limited in activities pertaining to normal living as verified by objective psychological or medical findings and includes a child with a developmental handicap.* *A DEVELOPMENTAL HANDICAP is defined in the DNA as a condition of mental impairment*	Family composition is a key component in determining available income. Criteria used in the application process include the definition of the parent and the family unit as well as an assessment of the financial resources available to contribute to child care costs. Special needs (handicapped children) resource services are made available at no additional cost to parents. Fee subsidies are calculated on the 'regular' costs of child care. There is discretion within the DNA around fee subsidy to special needs (handicapped) children. It has been interpreted by CMSMs differently. Some families with special needs (handicapped) children receive full fee subsidy solely based on the verification of a mental or physical handicap (ie no review of assets or income). Other jurisdictions apply exactly the same needs test that is applied to families without special needs (handicapped) children. Others apply a needs test but show various levels of discretion at the increased budgetary needs of families with a special needs (handicapped) child. Eligibility for child care programs is aged based with	*In order to be eligible for Rent Geared to Income Housing:* - *applicants must occupy or have need of a dwelling in Ontario* - *household members are permanent residents of Canada or refugee claimants (Canadian citizen, landed immigrant, or any person allowed to reside permanently in Canada). Domestic workers are eligible only if their contracts do not include room and board;* - *immediately prior to occupancy, applicant must be permanently residing in Ontario and must not have a principle residence elsewhere;* - *applicants are at least 16 years old;* - *applicants are able to live independently with or without support services;* - *former occupants of provincially funded RGI housing with outstanding arrears have paid arrears in full, or the creditor has agreed to waive payment or accept partial payment see Part IV (i) Recovery of Arrears, and Part II (b) Waiting List Management* - *home owners have agreed in writing to sell their property within a six-month period of being offered accommodation. The six month period may be extended at the discretion of the non-profit.* *The income categories are defined as follows:* - *"high need" applicants would be spending 50% or more of their income for a public housing unit if it had market rent;* - *"RGI" applicants would be spending 30% or more of their income for the public housing unit if it had a market rent;* - *"market" applicants would be spending 30% or less of their income for the public housing unit.* *RULES FOR MARKET RENT / OCCUPANCY CHARGE HOUSEHOLDS (NON-PROFIT ONLY)* - *former residents of RGI housing who have left owing money will be considered only if the debt is paid in full unless the creditor has agreed to waive payment, accept partial payment or accept an agreement to pay* - *any applicant eligible for priority, See Part II(b) Waiting List Management, who owes money from a former RGI unit*	Applicants for Social Housing must provide all supporting documentation required by the housing provider for verification of total household income. Applicants who would pay more than 30% of their income for market rent of the unit to which they are applying are eligible to receive RGI subsidy. Applicants who would pay less than 30% of their household income for the unit would pay the applicable market rent.

Part III (a) Classes/Categories of Eligibility

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
		present or occurring during a person's formative years that is associated with limitations in adaptive behaviour. *MCSS policy indicates that no parent should have to pay a higher child care fee subsidy for a special needs (handicapped) child than for any other child.* *Services for special needs (handicapped) children may not be subject to the requirement that the parent(s) work or be in school.* *Provincial guidelines state that subsidized care should be provided to support employment, training or educational needs for parents.* *Subsidized care can also be used to support the developmental needs of children including those with special needs (handicapped).* *ONTARIO WORKS CHILD CARE FEE SUBSIDIES:* *Child care arrangements should support the commitments made in the participation agreement signed by the participant and the OW manager. Funds can be used to support either informal or licensed child care, and OW participants should have access to both options.* *Subsidy is either full or partial based on the needs test, available income and the cost of care (i.e. infant care is more expensive than school age care).* *The LEAP program has some specific requirements (e.g. to stay in school).*	child care programs licensed for specific age groups of children: Infants- under 18 months Toddlers- 18 months and over up to and including 30 months Preschool-more than 30 months and up to and including 5 years School aged- 6 years of age and over up to and including 12 years Consequently there is a great deal of movement within the child care system as parents endeavor to find programs close to their homes, places of work or the elementary school which the child or siblings attend. As the several children in one family grow through the licensed age groupings it is often required that they move from one centre to another. Due to licensing requirements centres may not have a place for a child graduating from one licensed group to another. Families moving to a different home, parents changing jobs or siblings changing schools all may have an impact on the requirements of the child care program.	*tenancy shall be considered as long as agreement to pay the debt has been reached with the creditor. Where the debt was incurred in a joint tenancy, the applicant is responsible for 50% of the debt.* *PRIMARY TENANT/MEMBER* *The following household members are considered primary tenants/members provided that they are eligible to be housed independently:* • *the head of the household and spouse (of each family in the unit)* • *any parent residing with a child such as:* ▪ *any daughter/son (of the head of the household or spouse);* ▪ *with own child;* ▪ *any parent or spouse;* ▪ *any single parent in addition to the head or spouse.* • *co-habitating spouses, couples, married or common-law: In addition to the head and spouse (with or without children)* • *a social assistance recipient who receives a cheque;* • *any senior citizen (age 60 and over);* • *any unrelated persons sharing a unit;* • *any non-dependant relatives such as brothers, sisters, aunts or uncles of the head or spouse;* • *any current signatories to the lease;adults/adult children who have joined the household and therefore are not a current signatory to the lease, or who have left and rejoined the household;* *SECONDARY TENANTS/MEMBERS-include all members of a household with the exception of primary occupants as defined. Most working children without dependants and who have never left the household are secondary tenants/members.* *HOUSEHOLD TYPE* *Applicants will be assigned a household type of either Senior, Household with Dependant(s) or, Household without dependant(s)*	

Part III (b) Verification of Information

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
No person is eligible unless required documentation is received for the applicant/recipient and prescribed dependants. *Verification documents are required to obtain and maintain eligibility for each person in the eligibility unit as follows: Birth Certification, Health Numbers, Social Insurance Numbers, Marital Status, Immigration Status, Income/Earnings, Assets and Real Property, Debts, Residence, School Attendance, Employment, Educational Status, and Participation Restrictions (i.e. medical).* *Actual documentation required or their alternatives are listed in the directives.* • *requests for assistance are processed in fourteen days from the date of application, where an applicant has provided all information necessary for a determination; and* • *the information necessary for determining eligibility and making an application for assistance is explained to every applicant as well as their rights and responsibilities.* *When all the information has been verified and the applicant is eligible, all necessary applications and forms must be signed by the appropriate benefit members. Rights and Responsibilities are discussed along with special benefit items. Support and sponsorship agreements and any assignments are processed.*	Currently original up-to-date documents are to be presented to the case manager, by the applicant, at the interview held in the office or during the home visit. Documents are photocopied and retained in the client's file, with the original being returned to the client. The applicant is provided reasonable time to provide outstanding information necessary to determine eligibility. The case manager considers factors beyond the control of the applicant when setting a time frame for the information to be submitted e.g. out of province birth certificate. Given these considerations a reasonable time frame could be determined to be 2-10 working days. The applicant is advised and must indicate understanding of their responsibility to provide outstanding information by the designated date, and the consequences for not doing so. The case manager cannot establish eligibility until all required documentation has been submitted. Further verification may be required to establish initial or ongoing eligibility e.g. contact with previous employer, Insurance Co., Employment Insurance, etc. Changes in any of the above areas must be re-verified and documented i.e. birth certificate for new baby, pay stubs etc. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL** • verification of initial and ongoing eligibility will be supported by 3rd party interfaces; • the majority of application information has been collected at Intake Screening and does not require reentry at the Intake Verification step; • if visual verification of some documents is	*All information must be verified. Generally, this means that the applicant must provide receipts for the amount paid for rent, heat, telephone, drugs, etc.* *The CMSM must use the regulated Form 1 – Determination of Available Income for subsidy applications and is responsible for ensuring its completion 'in accordance with the guidelines and verifying this information, including liquid assets, monthly income, net earnings and monthly budgetary items'.* *Form 1 must be signed by the applicant certifying that the information provided is correct.* *The "Consent to Inspect Assets" is part of Form 1. It must be signed by the applicant, a witness, and spouse (if applicable). The applicant authorizes the administrator employed by the CMSM to inspect any account or safety deposit box at a financial institution.* *VERIFICATION OF NET EARNINGS:* *Applicants should be asked to produce a pay slip or equivalent statement to verify information.* *OSAP:* *Students receiving OSAP need to provide confirmation of their Child Care Bursary and OSAP Assessment Summary Form.* *Copies of applicants' documents related to needs testing must be*	Provincial guidelines for completion of the Form 1 do not outline extensive standards for the level or method of verification of documentation only to say that client source documents should be copied and kept on file so that future interviewers can ascertain the existence of the documents. Individual CMSMs establish their own procedures and guidelines for verification. The Service Manager's Module for Child Care is a computer program which has automated the Form 1 including the full range of required documentation but verification standards are not prescribed. Data includes birth dates, social insurance numbers, marital status and family composition along with liquid assets, monthly income and budgetary needs. (This automated system is under development and is not currently used universally. The Ministry has not yet indicated whether this system will be mandatory but all CMSMs will be required to report on the same data elements as defined by this system.) However this system is stand alone software available to use at each CMSM's site. It is not part of a province wide network such as CIMS.	*All sources of income to be included in a tenant/member's rent calculation must be verified.* *Each source of declared income must be supported with the appropriate verification, which is kept in the tenant/member's file.* *Applicants/residents must provide verification of income prior to signing the lease.* *For an Income Review the following information is required:* *List of all members of the household including:* • *names of all members (to confirm changes to household composition);* • *Relationship to the primary tenant/member (to verify secondary wage earner status, student exemptions, etc.)* • *birth dates (to confirm student exemption, eligibility for pensions, etc.)* *DECLARATION OF INCOME FOR ALL MEMBERS OF THE HOUSEHOLD includes dependants as well as the primary and secondary tenants/members. The occupant should acknowledge that they have read the 'Definitions of Income and Gross Family Income", and that the information provided by them is accurate and complete.* *SOCIAL ASSISTANCE* *Copies of the 'Notice of Assistance Stub' and the 'Drug Benefits Eligibility Card' should be used as verification for residents on social assistance (OWA, ODSP, and GAINS D). The Drug*	The income review is completed when a unit is available and accepted. This could be some time after the initial intake. Depending on the source of income, there are three forms used by OHC for verification; Employment Verification, form 27, Self-employment Verification, form 34, and Verification of Assets, form 40. Non-profits have developed their own forms or use OHC forms as a template. The applicant/resident is responsible for providing the appropriate income verification documentation. Cheque stubs or copies are acceptable. The original or a copy of the verification document must be retained in the tenant/member's file. Social Assistance income is verified by the cheque stub and a copy of the drug card. Verification of income such as EI, WSIB, pension, Disability benefits, support payments, and Training allowances, copies of cheque stubs are preferable, as these usually include the gross amount and the frequency of the payment. If the cheque stubs are not available, or if the income is deposited directly into the resident's bank account, the resident should provide a letter from the financial institution indicating the gross amount and the frequency of the payment from the source. • ANNUITY INCOME- in determining the gross income from annuities, the fixed monthly payment at the time of the annual income review is used whenever possible. Most annuities make fixed payments on a regular basis; however, some such as RRIFs pay an increasing amount over time.

Part III (b) Verification of Information

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	completed the unique identification number is recorded on the application. • attendance at an OW session may be held prior to the Intake Verification interview for offices where sessions occur often (i.e. daily); This results in; • a shorter financial eligibility interview with focus on confirmation of information; and • the focus of the Intake Verification interview can change to address pertinent program information i.e. employment issues	*verified and are retained. The retention policy for fee subsidy files requires that closed files be retained on site for the current year and for an additional 2 years, then retained off site in secure storage for 6 years.* *SELF-EMPLOYED persons are required to provide sufficient financial income records, e.g. previous year's income tax return and financial statements to determine the net income derived from an interest in, or operation of, a business.*		*Benefits Card identifies the number of beneficiaries, and the cheque stub will provide information about income the household may have.*	

Part III (c) Client Identifiers

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
Verification of date of birth and social insurance numbers are two of the requisite pieces of identification required upon application for OW. *These two common client identifiers are required in order to allow for standard client identification and the sharing of information when this information is necessary for purposes related to the powers and duties under the OWA. See Part V (h) Privacy Requirements.* *Automated technology (CWT, OWT) use the first five letters of the clients name plus the date of birth to identify the client, i.e. BROWN010151* *The act makes provisions for the use of biometric technologies to support program delivery, subject to strict conditions, including privacy safeguards.*	Currently, CIMS, CWT and OWT use the first five letters of the client's last name as well as their DOB and a sequence # to identify clients. Standardized province wide identifiers allow the system to avoid duplication (one client receiving assistance in two municipalities, or opening a second file in one municipality). These systems also assist delivery sites to review payment histories in other delivery sites when necessary and to contact those sites when required. Recording of SIN allows OW to check with Human Resources Development Canada regarding EI Benefits. The use of biometric identifier for the purposes of issuing social assistance is provided for in the act, but has not been instituted. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • each person will have a member identification. • each case will have a benefit unit identification .	*There are currently no standard methods of client identification provincially. Local CMSMs have developed their own local systems.* *In most municipalities both the adult and child(ren) have their own client identifiers .*	The Service Manager's Module for Child Care will provide a common database and client identifier. The client identifier will be identical to OW, i.e. the first five letters of the last name plus the birth date. However since this database is not linked to OW there will be the occasion where clients with legitimate duplication in names and birth dates will be registered differently between the two programs. This system provides separate databases for children and parents. However this system is stand alone software available to use at each CMSM's site. It is not part of a province wide network such as CIMS.	*OHC uses an "account number" to identify its applicants/residents. This number is made up of the year and month. Other identifiers in the system include the individuals birthdate, address, SIN (optional) and phone#.* *A client's file can be searched by any of these components.* *Where the LHA is also the Coordinated Access System, this number is used to access the Waiting List System as well.* *Non-profit providers have developed their own system of client identifiers within their coordinated access area.*	Client identities are verified through birth certificates, landed immigrant documents and refugee documents.

Part III (d) Age Requirements

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Persons under age 18 yrs cannot receive OW in their own right (exceptional circumstances must be present and assistance is trusted)	Currently: Age is determined through questioning at the intake screening and verification of age(s) by presenting birth certificate(s) at the interview. At the interview the case manager inquires into special circumstances. If there are no special circumstances, the applicant is advised of ineligibility and the right to internal review and appeal. If there appear to be exceptional circumstances these are confirmed by the case manager through follow up to other sources i.e. parents, school, and involved agencies as required. If exceptional circumstances are verified, the client can be deemed eligible. The conditions of eligibility for the client are to remain in school, submit attendance records and marks, and that their assistance is trusted. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • when persons under 18 contact the Intake Screen Unit, their information will be captured. • applications by persons under 18 will be forwarded to Intake Verification for an assessment of special circumstances.	*There are no age restrictions placed on the parents within the family unit. However subsidized child care is only available for children under the age of 12 or 18 years of age for a child with special needs (handicapped).*	The Form 1 requires a listing of children's ages. The Service Manager's Module for Child Care documents birth dates.	*Persons must be 16 years of age or older to be eligible for RGI units.* *SENIOR: is defined as an individual who is* ▸ *in their 60th year or older* ▸ *a couple where at least one partner is in their 60 th year.* *STUDENT: a 'secondary' tenant who is attending a recognized learning institution on a full time basis and is under 26 years of age*	Birth certificates are required proof of age and copies are kept on the file. School verification is required and may take the form of tuition receipts or a letter from the school. This is requested annually. Verified student status is used for shared physical custody situations for determining unit size.

Part III (e) Residency Requirements

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Only residents of Ontario receive assistance. *A person who is absent from Ontario for a period greater than 7 days is not eligible for assistance unless the absence has been approved by the administrator as necessary for reasons of health or because of exceptional circumstances.* *An application for basic financial assistance shall be made to the Administrator for the geographic area in which the applicant is ordinarily resident.* *HOMELESS OR TRANSIENT PERSONS are eligible to receive assistance even though they do not have a permanent home, if they are otherwise eligible to receive assistance.* *The length of time that a person resides in the geographic area is irrelevant to an application for assistance. A person's intent to reside in Ontario constitutes residence.* *The amount of assistance issued is reflective of their budgetary needs as determined by their residence.* *The directives address residence in nursing homes, hostels, interval and transition homes.* *IMMIGRANTS, REFUGEES AND DEPORTEES may be eligible if the administrator is satisfied that :* *-for reasons wholly beyond the person's control the person is unable to leave the country; or* *-the person has made a claim for refugee status or an application for status as a permanent resident under the Immigration Act*	Currently applicants will provide proof of residence at the interview or while receiving assistance, when their address or their shelter costs change. This documentation may be verified with third parties where required. Participants are aware of the "7-day rule" by having had the Rights and Responsibilities form read and explained to them, and signed that they understood it, at the interview. Where a request for absence is made, the case manager provides a decision within a reasonable time frame. The reasons are documented in the narrative section of CWT. The client documents their absence by providing receipts such as bus tickets or an affidavit where there are no receipts. Where there has been an unapproved absence for more than 7 days, a decision is made to reduce eligibility or to disqualify the participant, depending on the circumstances. Documentation to verify status in Canada must be on file. Where the applicant has been sponsored, the case manager will be required to investigate the sponsorship status by contacting Citizenship and Immigration Canada , and the sponsor(s) . (Information sharing agreements have been set up with Immigration Canada by many municipalities. This may become province wide). Where a sponsorship breakdown has been reported, speaking with the sponsors and completing a financial assessment may be necessary. All avenues to pursue available income from the sponsor will be taken; this may include court action. Family Support Workers may assist in the pursuit of support from the sponsor. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** BTP supports current practices. Status will be captured at Intake Screening	*There are no provincial guidelines on residency requirements. However most CMSMs restrict eligibility through local guidelines*	CMSMs set their own standards and in the vast majority of cases, require applicants to reside within the boundaries of that CMSM. One CMSM offers subsidy to parents who are employed by the CMSM regardless of the location of their residence. Some CMSMs have 'charge back' agreements whereby if an applicant lives in one area but has a subsidized daycare space in a neighboring CMSM, the neighboring CMSM will charge back the cost of this space to the CMSM where the applicant resides	*In order to be eligible for RGI housing, applicants must:* • *be permanent residents of Canada (Canadian citizen, landed immigrant, refugee or refugee claimant);* • *must occupy or have need of a dwelling place in Ontario*	Residency is verified through the following documentation: birth certificates; • citizenship or landed immigrant papers letter from Immigration Canada identifying the applicants as refugee claimant(s) • passport or visa only acceptable if explicitly stating refugee status (OHC).

Part III (f) Definition of a Spouse

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
'Spouse' is defined according to the Family Law Act. An applicant or participant is eligible to receive assistance as a single person or sole support parent, unless he or she resides with a person of the opposite sex who is presumed to be his or her spouse. Evidence is required to satisfy the administrator that the financial, social and familial aspects of the relationship do not amount to cohabitation, in order for eligibility (as single/sole support) to continue. *Where an applicant or participant is ineligible as a single person or sole support parent because they are cohabiting with another person of the opposite sex, the applicant or participant and the person of the opposite sex may together apply for assistance as an 'intact' family. Their needs are assessed as a family and their pooled resources are taken into account.*	Currently, critical information in all applications is other means of support and income i.e. current and previous 'spousal' relationships support for children . Previous relationships, where an obligation to support the members of the benefit unit exists, are investigated by taking a detailed history, and where appropriate referring to the Family Support Worker. See Part III (o) Pursuing Other Income. Where a person of the opposite sex is co-residing with the applicant or participant, a 'determination' of spousal status Form #2764 is completed to determine if the co-residence amounts to cohabitation. Cohabitation is defined according to the areas of social, familial and financial relationship to the applicant/participant. An analysis of this questionnaire will assist the case manager, in determining if the relationship is to be considered a cohabitation (spousal). There is no exact number of questions to be answered correctly. A preponderance of the answers given indicate that the applicant's or participant's co-residents have the social, familial and economic characteristics of cohabitation. Often these cases are given to a supervisor/ manager for a final dispensation. Where an applicant or participant declares that they reside alone, but the administrator has reason to believe that there is a co-resident, these suspicions must be objectively investigated using means such as: • statement from landlord, or copy of lease, • driver's license history, car registration, • employment records, • school records • credit checks, • voters lists or enumeration, etc. where such evidence is not available, the file will remain under review. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • BTP support current practices • Information on previous spousal relationships will be collected • FSWs across the province will have access to FRO information through interface with MECA.	*A PARENT is defined in the Day Nurseries Act (DNA) and for the purposes of resources available to contribute to child care. SPOUSAL RELATIONSHIPS are defined as:* • *couples in a relationship with some permanence and/or* • *couples cohabiting for a period not less than three years* *Section 29 of the Family Law Act is used to further define spouse:* *'SPOUSE' means a spouse as defined in subsection 1(1), and in addition includes either of a man and woman who are not married to each other and have cohabited,* *a) continuously for a period not less than three years, or* *b) in a relationship of some permanence, if they are the natural or adoptive parents of a child (conjoint).* *In cases where the applicants (couples) have cohabited for a period less than three years and have a child of common parentage, the parents have an obligation to support the child.* *Family Law Act regulation 31(10) obligation of parent to support the child states:* *Every parent has an obligation to provide support for his or her unmarried child who is a minor or is enrolled in a program of education, to the extent the parent is capable of doing so.*	Family composition is a key component in determining available income. Criteria used in the application process include the definition of the family unit and the assessment of the total financial resources available from parents to contribute to child care costs. For the purpose of determining available income, it also applies to applicants who identify themselves as a parent. There are no standard forms or procedures to verify spousal relationships. Local CMSMs may use their own forms and processes.	*There is no definition of spouse, they are considered part of the household.*	RGI rent is calculated based on gross household income and is adjusted up or down as required. Boarders are not allowed. Tenant/member reports change in income and household composition.

Part III (g) Information Verification Interview

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
The administrator may require an applicant to provide information necessary to determine and verify the applicant's eligibility for basic financial assistance, including information with respect to any member of the benefit unit. *An application for basic financial assistance and all accompanying forms shall be signed by the applicant and the applicant's spouse included in the benefit unit.* *The application is not complete until the application and all accompanying forms, agreements and consents have been completed and signed, and have been provided, together with any required verification of information, to the administrator .* *In determining the eligibility of an applicant who applies for basic financial assistance, the administrator shall make or cause to be made an inquiry into the living conditions and the financial, employment, and other circumstances of the members of the benefit unit.*	Currently, during Intake, basic information has been recorded. An 'Intake Form' is forwarded to a case manager, who completes the application as well as other required forms at an interview. This interview is scheduled within the required time frame either at the office or at a home visit. The applicant has been told to have required documentation ready, and this is used to complete the application. Both applicant and spouse must be present to sign the application form. Required forms for an application (where appropriate) for Ontario Works are: • Application Form (includes Part I – Financial & Part II – P.A. Participation Agreement for employment activities). The P.A. is signed by each person in the benefit unit with participation requirements • Form 3 Consent to Disclose and Verify Information • Form 4 Medical Report • Form 5 Application for Assistance (1a) • Consent to Obtain Information (1006) • Consent to Release Information • Application for Temporary Care • Agreement to Reimburse • Employment Insurance Inquiry • E.I. Assignment of Benefits • Assignment and Direction • WSIB Assignment • Life Insurance Record • CPP Assignment and Authorization to Communicate Information • Support Assignment • RRSP verification form • Cohabitation Information Sheet and Questionnaire • Declaration for Support and Maintenance (DSM) • Request for Sponsorship Information • Referral to Family Support Worker	CHILD CARE *See III (b) Verification of Information. There is no formal Intake Verification review process in Child Care.*		*Information is collected on the application form.*	The verification interview will take place sometime after the application for RGI housing when a suitable unit becomes available. Prior to signing a lease or occupancy agreement with the applicant, the housing provider must ensure that the applicant declares in writing, all persons who will be residing in the unit and the gross household income from all sources. This declaration must be supported with verification for all sources of income. • If information has been recently verified, it may not need to be re-submitted at the time the unit is offered. • An "Application update" form is used by some LHAs to capture new information not known at the time of application. See Part III (b) Verification of Information

Part III (g) Information Verification Interview

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	• FRO (Family Responsibility Office) Assignment • Direct Bank Deposit Information (DBD) • School Attendance Form • Appointment of Trustee • Verification Checklist • Rights and Responsibilities Many delivery sites have developed supplementary forms to capture specific information i.e. job search information. Currently, the application form is completed on CWT with some employment information automatically transferring to OWT. Supplementary documentation is noted in the CWT narrative and documents are copied for the file. During this interview the 'Rights and Responsibilities' form is explained and the client signs to indicate that they understand the contents. OWT is designed to assist with employment planning .'Bring Forwards' are completed on both CWT and OWT to monitor eligibility. Verification with third parties is completed as appropriate before eligibility decisions are made. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: This process is streamlined by completing data capture on the actual application form at the Intake Screening Unit using a new system being developed. When the applicant is seen at the interview, very little time is spent capturing data. The majority of time is spent verifying information and assessing and planning employment activities. (The focus of this matrix is not employment activities although these activities are very important to maintaining eligibility). Note: a decision of eligibility can only be made after all of the information is on file and verified. See Part III (b) Verification of Information				

Part III (h) Eligibility Determination – Financial Testing

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**

The financial test for Ontario Works is a NEEDS TEST which compares assets and income to the needs of the family/individual. The deficit is the amount of financial assistance to be paid. A surplus means the family/individual is not eligible for assistance.
Basic financial assistance includes:
• *income assistance provided for purposes of basic needs and shelter;*
• *benefits; and*
• *emergency assistance.*
In order to be eligible, the income of the applicant/participant and any dependants must not exceed their budgetary requirements and their assets must not exceed the prescribed limits, as provided for in the regulations.
Persons and dependants must meet any other prescribed conditions relating to eligibility.
As a result of being eligible for OW, the applicant/participant may also be eligible for benefits to assist with Employment and Community Start-up and Employment Related Expenses. These supports are to promote self sufficiency.
	A calculation of financial assistance is completed when the information is entered into CWT (at the intake level) and is uploaded to CIMS, when verification has been completed. Financial eligibility calculation is 'system driven'. The calculation is based on established rates for basic needs and shelter. Family demographics including numbers of family members and their respective ages will determine the basic needs component of income assistance. The shelter component is determined by the current living arrangements and the verified information entered into the system, and established rates. The case manager enters the verified information furnished by the applicant/participant, including income charges, and the CIMS system calculates the monthly entitlement for the benefit unit.
	KEY FEATURES OF NEW SERVICE DELIVERY MODEL:
	• Standardized processes and a calculation tool to provide immediate financial eligibility determination.
		Eligibility is determined by the NEEDS TEST (Form 1), a calculation that compares assets and household total income to the needs of the family. The resulting surplus or deficit is used to determine the amount of parental contribution to the child care fee.
		The CMSM's roles and responsibility include administering Form 1 (Regulation 262 under the DNA) to determine eligibility for child care fee subsidies.
		Completion of the form must be in accordance with the Ministry Guidelines for Determination of Available Income
		Persons eligible for income support under ODSP, FBA or OW are not subject to any further financial testing for subsidy.
			Documentation is required to verify available income (including liquid assets) and budgetary requirements. The Service Manager's Module for child care is currently under development. The software automatically calculates available family income and compares assets and expenses to pre-determined ceilings. This system also monitors the need for periodic review. (For example, annual financial reviews, subsidy expiry when child turns 10, etc.) The software follows the structure of the Form 1.
			Other CMSMs have developed their own software programs to calculate and monitor child care subsidy.
				The financial test used in the Social Housing program is an INCOME TEST. This test relies on the gross income of the household to calculate public subsidy. The user fee (rent) is typically 30% of household income plus or minus an adjustment for utilities. The balance of the cost is a public subsidy.
				ELIGIBILITY ASSESSMENT
				The Coordinated Access System will assess households to determine their eligibility for placement on waiting lists. The assessment should only be done once and not repeated by individual housing providers. These standards are taken from the Provincial Portfolio Operating Agreement.
				Occupancy standards-RGI households
				• *there must not be more than one person to a bedroom except in the following circumstances:*
				  • *spouses will be eligible for one bedroom; except if one or both spouses has a medically documented reason for requiring separate bedrooms, related and unrelated adults may agree to share a bedroom;*
				  • *two children may share a bedroom if mutually agreed to by an applicant/resident and provider. Factors such as the size of the bedroom, ages and sex of the children are considerations;*
				  • *a parent and a child (under the age of 5) may share a bedroom if requested by the applicant and agreed to by the provider;*
				NOTE the number of individuals allowed to reside in a dwelling is governed by local municipal by-laws. Providers should also be aware of local municipal policy concerning occupancy standards.
				There must be at least one person to a bedroom to qualify for a rent subsidy except in the following circumstance:
				• *any member of a household who is disabled may require a separate bedroom to store equipment. Providers may exercise discretion in accommodating the needs of disabled individuals in a case-by-case review and maintain records of these arrangements.*
				• *pregnant applicants/residents-may be allocated an extra bedroom in order to provide for the unborn child.*
					Income information is taken from the application form and 30% of this income is calculated as the rent the applicant would be required to pay. This amount is compared to the market rent for the unit(s) required and if less than the market rent, the applicant is considered eligible for RGI subsidy.
					In order to determine the size of unit the applicant is eligible for, the following information may be required:
					• Medical confirmation may be required to confirm the pregnancy period, where a larger unit is requested for an expected baby.
					• Verification from the Children's Aid Society or a certified copy of the court order is needed to confirm where the parent(s) may not have full custody, or may be expecting to regain custody of a child(ren) in the future. .
					A case-by-case review is needed to determine whether extra space is necessary. The onus is on the applicant/resident to verify that an extra bedroom is required to fulfil access arrangements. A letter from the sole custody parent may be sufficient in some situations or arrangements may be indicated in a separation agreement. When requesting verification from sole custody parents, the housing provider should be sensitive to circumstances which may cause undue hardship to the relationship between the parents. Where there is no stipulation of adequate accommodation as a

Part III (h) Eligibility Determination – Financial Testing

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
				• *joint custody- children are counted as part of the household; as they are for situations where child(ren) are being returned or are under court order from the CAS.* • *sole custody- non-custodial parents with access rights may request an extra bedroom to accommodate a child(ren) who regularly requires overnight accommodation.* • *children who are out-of-town full-time students up to the age of 26 will be counted as part of the household as long as they are attending a recognized learning institution on a full-time basis, and dependent, in whole or in part on the family for financial support* • *bachelor apartments are usually allocated to a single individual, municipal by laws may permit more people who wish to share a bachelor apartment* *CHANGES IN FAMILY COMPOSITION* • *after move in, residents shall be able to remain in the housing unit chosen, as long as the one person per bedroom requirement is met* • *over-housed residents are no longer eligible for a rent/occupancy charge subsidy in the unit and will be required to either transfer to a smaller unit to continue to obtain an RGI subsidy or remain in their current unit and pay the market rent/occupancy charge* *UNDER-HOUSED RESIDENTS may choose to apply for a transfer or remain in an under-housed situation. Since the number of individuals allowed to reside in a dwelling is governed by local municipal by laws, providers should be aware of local policies concerning occupancy standards.*	condition for access, extra space shall not be granted. Housing providers shall permit temporary crowding to allow parents access to their child(ren).

PART III (i) Calculating Assistance/Subsidy/Rent

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The amount of income assistance for a benefit unit shall be calculated on a monthly basis by determining the budgetary requirements of the benefit unit in accordance with the prescribed basic needs, and shelter tables. *Amounts prescribed for items such as; special diet, board and lodging, fuel and utilities, co-residency, advanced age item, homeless persons, employment supports and community start up for persons who are institutionalized ,are included in the regulations.* *The regulations specify income types and percentage of these incomes are to be considered in the calculation of assistance.*	Currently, the case manager enters verified data into the CWT system. CIMS automatically calculates financial entitlement, overnight, applying income and earnings against the entitlement as per the regulations. Automating determination of eligibility and the calculation of benefits removes the need for manual assessments and ensures that decisions are made faster and with greater accuracy. A profile is produced with each new cheque, or change in entitlement, showing the budgetary entitlement as well as deductions by their type. The case manager is able to use this profile (retained on the file) on a monthly basis to monitor income and earnings and to assist the client to understand their benefit amount. The case manager is also able to obtain a 'payment history' on the CIMS system for reference. Benefit calculation includes retroactive budget calculation (RBC-recalculates previous budgets with new information determining overpayments/underpayments). **KEY FEATURES OF NEW SERVICE DELIVERY MODEL** :-a tool to automatically calculate financial eligibility will be introduced in the new Service Delivery Model.	*Eligibility for a child care subsidy is determined by the needs test (Form 1), a calculation that compares assets and the household's total income to the needs of the family. The resulting surplus or deficit is used to determine the amount of parental contribution that is required. The amount of fee subsidy is the difference between the actual cost of child care and the available income for child care as determined by the Form 1.* *Standard tables based on family size and composition are used in calculating budgetary need and are attached as appendices to the Ministry's guidelines. They include:* *1) the maximum liquid assets allowed based on family size and composition* *2) the amounts for basic needs allowance based on family size and composition* *3) allowable amounts for special diets* *4) maximum shelter allowances* *Ministry guidelines recognize 'the diverse community needs and circumstances in various parts of Ontario. Therefore, a level of discretion is allowed for CMSMs to exercise prudent judgement.'* *CMSMs are instructed to set their own policies regarding a number of items including ceiling levels for mortgage, rent or debt payments, travel and transportation. These ceiling amounts should be reviewed at least once per year and a clear written policy on these items is required.* *CMSMs also are allowed to include*	The Form 1 records the liquid assets, monthly income and budgetary items and provides a structure for the calculation of any surplus or deficit. After asset and income levels are established the monthly budgetary needs of the family are established. Budgetary items are listed in the Form 1 as: • basic needs (determined by standard table) • special diets (determined by standard table) • heat (annual cost divided by 12) • telephone (basic monthly rate for one standard phone line) • contingencies (20% of the total amount of the basic needs, special diets, heat and telephone) • rent (actual amount paid up to maximum allowed by standard table, each CMSM should set a maximum allowable rent which is reflective of local costs but which does not exceed maximum shelter allowance in the standard tables) • mortgage (principal and interest) actual amount paid up to the maximum permitted by the CMSM. The combined total of mortgage and property taxes may not exceed the maximum allowed for rent • property taxes (actual monthly amount paid) • debt payments(actual monthly amount paid up to the maximum amount permitted by the CMSM) • travel and transportation (actual monthly costs of round-trip to the day nursery and place of	*There are two rent scales used in calculating the geared-to-income rent:* *(1) RGI scales for socially assisted residents:* *Rent/housing charge is based on the number of beneficiaries in receipt of SA rather than the amount of assistance that is received.* *(2) RGI Ratio:* *all non-Social Assistance applicants have RGI payments calculated on a 30% RGI ratio* *Rent/housing charge is calculated by applying a percentage to the total gross monthly income of the household once the appropriate deductions have been applied.* • *rent/housing charge calculations for primary occupants:* *-the percentage of income used in rent calculation is 30%* • *rent/housing charge calculations for secondary occupants (May 1990):* *-total all sources of income* *-do not deduct the earned income exemption if there is earned income and multiply the first $1000 by 15%, then multiply the amount over $1000 by 30%* *-add the results together to get the RGI charge for secondary tenants/members* *NOTE where the total earnings of a secondary occupant do not exceed $75 per month, there will be no RGI charge for the secondary occupant* *GROSS NON-BENEFIT THRESHOLD* *is used to determine which rent scale should be applied to calculate rent/housing charges for residents with income in addition to social assistance, such as employment earnings or support payments.* *In HOUSEHOLDS WITH MORE THAN ONE SOCIAL ASSISTANCE RECIPIENT* *each SA recipient within the same household will have their rent/housing charge calculated*	Step 1. Ensure that all income declaration is complete. All members of a household are required to report their income for rent calculation purposes. This includes primary and secondary tenants/members. Verification of each income source must be provided for the non-profit by the tenant/member as a condition of their lease. See Part III (b) Verification of Information. For regular employment, this is the most recent eight week or two month period. For fluctuating forms of income, such as irregular employment income, overtime or commissions, the income received over the past twelve months is verified . Step 2. Identify excluded income. Certain income is wholly exempt for the purposes of rent calculation. See Part III(l) Treatment of Income. Tenants/members are still required to report these sources of income. Step 3. Ensure that declared income figures are gross monthly amounts. The calculation factors to be used in the conversion are: annual income divide by 12; weekly income x 4.333; bi-weekly income divide 2 x 4.333; daily income x 21.66. Step 4. Identify social assistance income. If social assistance is the sole source of income in the household, apply Social Assistance scale. If there is other income in addition to social assistance refer to the social assistance scales to determine the gross non-benefit threshold. If the income is lower than the gross non-benefit threshold - apply Social Assistance scale. If the income is higher -- apply RGI ratio to gross non-benefit income after applying any applicable allowances, etc. Step 5. Apply earned income exemption. Households who receive earned income including EI and short term WSIB are eligible for this exemption. Step 6. Identify income producing assets. These are included for rent calculation purposes. Step 7. Identify non-income-producing assets. An imputed income is used for rent calculation purposes. See part III (k) Treatment of Assets Step 8. Determine total gross monthly household income. After

PART III (i) Calculating Assistance/Subsidy/Rent

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
		additional budgetary items under the category of 'other' for such items as laundry, life insurance etc.	employment either by public transit or by private car. CMSM to set guidelines.) • drugs (any prescribed medication not covered by insurance) • dental services (actual expenses not covered by insurance plan and consistent with the fee schedule of the Ontario Dental Association. CMSM to establish their own maximums) • optical services (actual expenses not covered by insurance plans. CMSM to establish maximums) • health services (actual costs of extraordinary expenses not covered by insurance, e.g. speech therapy) • other items to be included should be contained in a written statement of CMSM policy. Categories of reasonable items of expenditure may include: • life insurance and property insurance premiums • cost of child care for other dependent children • coin laundry costs Budgetary need is compared to the family's income to establish their available daily income for child care. This is compared to the total per diem cost of child care to determine the level of parental contribution. A user fee may be charged even if the parent has no available income for child care.	*separately in accordance with the guidelines. The individual calculations for each recipient will then be added together to determine the total rent/housing charge for the household.* *Note: Total rent must not exceed market rent.* *EARNED INCOME EXEMPTION* • *$75. single, $150. family per month households in receipt of income from an earned source such as employment, self-employment, EI, or short-term WSIB are entitled to an earned exemption for RGI calculation purposes. See Part III (m) Treatment of Earnings.* *FULLY SERVICED RENT* • *is defined as rent that includes heat, hot water, water, refrigerator, and stove. If the services provided differ from these five items , a utility charge is added to the rent if additional services are provided, and/or, an allowance is deducted from the rent if there are fewer services.* *UTILITY CHARGES* • *a utility chart provides a breakdown by unit size of the current utility charges.* *UTILITY ALLOWANCES* • *where the rent does not include all five services/facilities, tenants/members will pay for the services directly or provide their own appliances. In these cases tenants/members receive an allowance to reduce their rent. Utility allowances can not reduce the rent below the minimum amount of $32.00.* *The percentage of income used in calculating rent is 30%.*	appropriate adjustments are made all eligible income is totaled. Step 9. Apply the appropriate rent ratio. Step 10. Apply utility charges/allowances . Step 11. Compare RGI rent to minimum and maximum rents. Rent is checked to ensure that it is not less than $32.00 per month and not more than market rent for the unit. Step 12. Additional charges to cover costs of other services such as parking or cable t.v. are added. Step 13. If the rent is for a partial month the rent is prorated according to established factors.

PART III (j) Capturing Data

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The administrator requires an applicant to provide necessary information to determine and verify the applicant's eligibility for basic financial assistance, including information with respect to any member of the benefit unit.	Currently, the process for capturing necessary data begins at Intake/screening. In both current practice and with new BTP processes it is imperative that data is entered accurately into the system to ensure that eligibility can be established accurately and that correct amounts of assistance are issued. OWT and CWT are tools that assist in determining eligibility. Designated intake workers and case managers have undergone extensive training in CWT and OWT to ensure a skill level necessary to efficiently establish eligibility and issue correct benefit amounts as a result of accurate data capture and entry. It is important for case managers to correctly input codes to identify income from employment, to measure employment outcomes, and to identify information regarding non-compliance in the event of re-application for assistance. The ASAP project has equipped delivery sites with hardware and software, fully automating the data capture process. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** Improvements to the way in which data is collected and used through automated supports for workers collecting and entering the data. A common 'province-wide' database will support a two step intake process.	*The (DNA) section 2.2(4) states: 'Each CMSM shall keep information collected under this Act in the form and electronic system required by the Director.'* *The information in the regulated Form 1 must be fully completed and on file for all families who are receiving a fee subsidy.*	The Service Manager's Module for Child Care is currently under development. The software automatically calculates available family income and compares assets and expenses to pre-determined ceilings. This system also monitors the need for periodic review. (For example, annual financial reviews, subsidy expiry when child turns 10, etc.) The software follows the structure of the Form 1. Some CMSMs currently have developed their own computerized systems to calculate and monitor subsidy and parental fees.		Non profit providers capture data manually or have developed various independent packages. OHC- LHAs use the Micro Rent Tracking System.

PART III (k) Treatment of Assets

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Definition of assets *LIQUID ASSETS are cash, bonds, debentures, stocks, certificates, the cash surrender value of a life insurance policy, equity in property, a beneficial interest in assets held in trust and available to the beneficiary and other property which can be readily converted into cash. Exempted assets are set out in the regulations.* *MAXIMUM ASSET LEVELS – (standardized across the province)* *The prescribed limit for assets for a benefit unit are: the maximum income assistance before deductions for a single person; one month's maximum income assistance before deductions plus $500.00 per child for families; and, the maximum level for a child under temporary care is $500.00.* *Note: if the applicant or spouse has applied for ODSP the asset levels for the ODSP program will apply (one time exemption).* *VEHICLES* • *value of a primary vehicle must be less than $5,000* • *a secondary vehicle, value must be under $5,000 if the vehicle is necessary for participation in OW employment activities* *TRANSFER OF ASSETS* *Inadequate consideration- occurs when the applicant did not receive fair market value for an asset. In these cases those transferred assets may be taken into account as though the applicant still had them.*	Currently, assets have a critical bearing on eligibility for assistance. Case managers determine the value of an applicant's or participant's assets and the asset level of the benefit unit to decide if the applicant or participant is eligible. The definition of assets and its exceptions, the asset levels, and the treatment of various assets will assist the case managers in determining eligibility. The case manager verifies this status by contacting the financial institution. All assets undergo rigorous review by the case manager. The 'Consent to Disclose and Verify Information' as well as other statutory forms listed in Part III (g) Intake Verification Interview, may be presented to banks, lawyers, insurance companies etc. to ensure the status of the asset (liquid or not), and that the amount does not exceed the maximum levels. This review covers the past twelve months but may extend to three years before the application date for assistance. In considering transferred assets the case manager determines the reason the asset was transferred and also the market value of the transferred asset. This usually entails contacting third parties to determine amounts and verifying the information. Receipts for transferred assets are obtained to document the transaction(s). Each case is considered individually using reasonableness where there is	*LIQUID ASSETS are defined as:* *'Cash, bonds, debentures, stocks, an interest in real property, the beneficial interest in assets held in trust and available to be used for maintenance and any other assets that can readily be converted into cash.'* *An applicant is deemed ineligible if their liquid assets are found to be in excess of the ceiling.* *Maximum asset levels are based on family size and composition:* *One parent plus — Asset level* *One child — $ 5,000* *Two children — 5,500* *Three children — 6,000* *Four children — 6,500* *Two parents plus* *One child — $ 5,500* *Two children — 6,000* *Three children — 6,500* *Four children — 7,000* ** add $500 for each additional child* *Guidelines also list exceptions and preconditions for assets. For child care purposes, liquid assets do not include the following: (this list is not exhaustive)* • *principal residences* • *a second property if it is for sale. All rental income from the property is considered income* • *inheritances and windfalls of $1000 or less* • *severance lump payments (these should be treated as earned income over a period of time)* • *proceeds from fire insurance being held to replace insured items within a reasonable period of time*	First step in assessing need and determining available income is a review of liquid assets. The assessment of allowable liquid asset levels requires an applicant to provide information on family composition since it includes the total financial resources available from parents/partners to contribute to the cost of child care. Also the allowable level of liquid assets is based on the family composition.	*DEFINITION OF INCOME PRODUCING ASSETS AND NON-INCOME PRODUCING ASSETS* *NON-INCOME PRODUCING ASSETS as the name implies do not produce an income. Non-income producing assets include all assets, investments or holdings which are intended to increase in value rather than generate regular income.* *Non-Income Producing Assets will have an imputed rate of return applied to the appraised or documented value of the non-income-producing asset. The resultant imputed income is then added to the gross household income for the purposes of RGI calculations. These include:* • *financial holdings* • *real estate* • *precious metals, gems and art; and* • *transferred assets.* *TRANSFERRED ASSETS-any non-income producing asset that is given away or transferred by an applicant or resident is considered to be a non-income producing asset for calculation purposes. This rule applies to any assets transferred after applying for assisted housing, or during a period of 36 months preceding the application.* *If real estate is transferred, a certified appraisal is Required (as soon after the transfer as possible) to determine the value of the asset.* *EXCEPTIONAL CIRCUMSTANCES- in exceptional Cases, assets which have been transferred by an applicant prior to being housed are not included in the RGI calculation* *FINANCIAL HOLDINGS to be considered non-income producing assets include:* • *cash or non-interest bearing chequing accounts;* • *RRSPs;* • *Equity in a business or investment that does not generate income;* • *Cab plates, taxi licenses;* • *Life insurance policies with a cash surrender value;* • *Non-income producing stocks, mutual funds; Mortgages or loans with low interest rates*	Documentation for TRANSFERRED ASSETS may be necessary for these residents who have had a major reduction in their assets but have not sold them. A resident could be required to provide proof that the asset was transferred prior to the 36 month period before application, or receipts to show that the decrease in assets has resulted from recent expenditures, not gifts to others. In certain exceptional cases, assets which have been transferred by an applicant prior to being housed are not included in the RGI calculation. BANK ACCOUNTS can be verified by completion of the Form 4 "Completion of Verification of Assets". The interest earned should be verified with a copy of the appropriate pages from the resident's up-to-date passbook or monthly bank statement. The resident should sign the copy or monthly statement and the following information should be written on the copy for future reference: account #, name and address of the institution, and total interest earned in the past year or the average monthly interest earned over the past two months. If this inspection is unacceptable to the resident, they should provide: T5 slips issued by the financial institution, or a letter from the appropriate financial institution indicating the amount of interest earned in the past 12 months. INTEREST EARNED on term deposits, bonds, or debentures (use form 4) should be verified from copies of the appropriate documents, i.e. a letter from the financial institution indicating the amount of interest earned in the past year. The following information should be recorded where appropriate: principal amount, interest rate and the amount of interest earned; the name and address of the financial institution; date of issue and term; identifying serial number. Note: term deposits, bonds or debentures with a fixed rate of interest for a term of more than one year need only be verified once. Income from stocks, shares and mutual funds (use form 4) should be verified from cheque stubs or copies of the cheques or T5's issued for tax purposes. The following should be recorded: • amount of dividends received; company name; series or type of stock; and number of stock shares

PART III (k) Treatment of Assets

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
TRANSFERRING TO QUALIFY - in all cases where, in the opinion of the administrator, liquid assets have been transferred in order to make the applicant eligible for assistance, he or she would be deemed to be ineligible, or assistance reduced. *SQUANDERED ASSETS -if there is nothing left and the applicant is now in need, then he or she must be considered for assistance.* *Maximums are set for items such as funeral prepayments, and vehicles.*	discretion, and fairness and consistency in treatment of assets for all applicants and participants. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL :** • the system will advise the case manager when assets exceed the allowable level	• *awards for pain and suffering of up to $25,000 when they are received as compensation for injury or death of an applicant or beneficiary.* • *inheritance of $65,000 or less when it is placed in trust for a disabled applicant or beneficiary and these funds are used for disability related expenses.* • *an inheritance exceeding $65,000 if applicant provides documentation that demonstrates to the satisfaction of the administrator, that the monies are required to meet the applicant's life time expenses.* • *a payment received under the Helpline Reconciliation Agreement (victims of abuse in provincial institutions)* • *payments made under the Multi-Provincial/Territorial Assistance Program Agreement for persons who were infected with HIV* • *payments under the Federal, Provincial and Territorial Assistance Program for Hepatitis C* • *Pensions that are mandatory* • *RRSPs that are locked in and cannot be accessed under any circumstances until retirement* • *prepaid funeral up to $2,250* • *education loans, grants, bursaries, scholarships or Registered Education Savings Plans provided for direct school related costs.* • *machinery, equipment and other items required to derive an income from self-employment.*		*MAXIMUM ASSET LEVELS there is no maximum limit set on assets in the SH program. Interest from investments is considered as income, see Part III (l) Treatment of Income. Calculation of rent is based on 30% of income.* *IMPUTED RATE OF RETURN for non-income producing assets should be assigned to these assets for RGI calculation purposes. The imputed rate of return is:* • *based on the interest rate for the first year of the most recent issue of Canada Savings Bonds, rounded down to the nearest whole per cent,* • *received annually, and* • *does not exceed 16%* *An imputed income based on the appraised or otherwise documented value is included in the geared-to-income calculation.* *FUNERAL PREPAYMENTS are excluded- if the money in the plan is withdrawn by the resident and not placed in another prepaid funeral plan, the money is then counted as an asset and actual or imputed income earned by it is to be included in the calculation.* *JOINTLY OWNED ASSETS with someone not living in the unit, are based solely on the income from the portion of the asset belonging to the member(s) of the household.* *UNUSED PROPERTY- the imputed rate of return applies to the outstanding value of unsold property, even if it is rented out.* *CAB PLATES/TAXI LICENSES - a cab plate is not considered a non-income-producing asset if the owner is using the plate to operate a taxi. See Part III (n) Self-Employment.* *If the owner of the cab plate allows someone else to use the plate, an appropriate portion of the appraised value of the cab plate should be treated as a non-income producing asset.* *RGI APPLICANTS WHO OWN RESIDENTIAL PROPERTY suitable for year-round occupancy are normally required to sell this property prior to being housed. Applicants with residential property may be housed in extenuating circumstances if so resolved by the*	Note: the actual amount of the dividend(s) should be included in the rent calculation, even if it is different from the 'taxable' amount of dividends. INCOME FROM MORTGAGES AND LOANS (form 4) only the actual interest portion of any mortgage or loan payments received during the preceding 12 months should be included in the household income for rent calculation purposes. The interest rate should be at least equal to the current imputed rate of return (published yearly by the ministry). Note: this is to discourage low interest loans to friends/relatives. Repayments of the principle should not be included as income. For verification purposes, residents who hold a mortgage or loan should provide an amortization or loan repayment schedule which shows the principle and interest of each payment. INCOME PRODUCING ASSETS- rent/housing charge is calculated based on the income produced by the assets. This is generally in the form of interest or dividend payments. For RGI purposes, the previous year's income from income producing assets is used when possible. This income is divided by 12 to obtain a monthly amount. Where the asset has been owned for less than one year, the previous year's income divided by the number of months it was owned can be used to calculate the monthly income. For investments that have been recently acquired the investment interest rate should be applied and future calculations should be based on the actual interest received by using the previous year's interest income in future calculations. JOINTLY EARNED ASSETS WITH A PARTY NOT LIVING IN THE UNIT. In this case, the income used in the rent calculation should be based only on the portion of assets belonging to the members of the household. ASSETS FOR SELF-EMPLOYED- assets and money tied up in a self-employed business should not be separately considered as assets, unless the resident is paying himself interest. This is because the effect of such assets is already reflected in the net self-employment income. If another household member is receiving income from an investment in a family business, the asset is treated as an income-producing

PART III (k) Treatment of Assets

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
				board of directors. In this case, the person is required to sell within six months of being housed. There should be special consideration for applicants, including assaulted women, who are unable to sell a residential property due to legal dispute over home ownership or an uncooperative co-owner who is delaying the sale of the property. *If any residential real estate is not sold prior to the applicant being housed, the resident's equity is treated as a non-income-producing asset until sold. The property should be appraised and an imputed rate of return on the appraised value included in the RGI calculation.* *NON-RESIDENTIAL REAL ESTATE is treated as a non-income-producing asset, even if it is rented and producing income. Rental income from real estate, rental property or land owned by a member of the household is not included in the RGI calculation.* *Life interest in real estate or a portion of some real estate may be given to a resident through a will or other document. The value of this life interest should be determined and the housing provider should ensure that the appraised value of this life interest reflects the resident's ability to sell or rent the real estate involved in the life interest.*	asset. TENANTS/MEMBERS WHO HAVE UNSOLD PROPERTY will have the total appraised/estimated value adjusted as follows: -subtract the value of any outstanding mortgages; -adjust to reflect the known portion of the tenant/member's ownership share in the property. If the tenant/member's interest is being disputed, the Non-Profit may estimate the tenant/member's ownership share, usually as 50%. IMPUTED INCOME for: • cash or non-interest bearing chequing accounts-based on the annual average or most recent typical minimum monthly balance of the account and the amount of cash • if the total is less than $300.00 this item should not be included in the rent calculation • RRSPs - based on current value of the RRSP • equity in a business or investment if it does not generate income, the imputed income is based on the tenant/member's current equity in the business or investment • cab plates-are not considered a non-income producing asset if the owner is using the plate to operate a taxi. In this case the income from the cab plate should be reflected in the rent calculations through self-employment income. If the owner of the cab plate allows someone else to use the plate, an appropriate portion for the appraised value of the cab plate should be treated as a non-income producing asset. • life insurance with a cash surrender value-the imputed income is based on the current cash surrender value of the policy plus any accumulated dividends NON-INCOME PRODUCING STOCKS, SHARES, MUTUAL FUNDS- the imputed income is base on the current value.

PART III (I) Treatment of Income

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The case manager must determine the income available to the applicant or participant. The income for the applicant or participant shall include all payments of any nature or kind whatsoever received by or on behalf of the applicant or participant, members of the benefit unit, and a dependant on whose behalf temporary care assistance is paid. *Definition of income:* • *all wages, salaries, casual earnings and amounts paid under a training program;* • *all regular and periodic payments received under any annuity, pension plan (paid under any country), superannuation scheme or insurance benefit;* • *all payments received under a mortgage, agreement for sale or loan agreement;* • *all payments received as a retainer from the Children's Aid Society for providing emergency care;* • *NCB (National Child Tax Benefit);* • *payments received or available where the applicant or participant is sponsored or nominated under the Immigration Act;* • *any payment received from the sale or disposition of an asset;* • *rental of self contained quarters (60%of the amount received from each person);* • *40% or $100. (whichever is greater) for each person where boarding (with meals) is being provided;* • *60% or $100. (whichever is greater) for each person where lodging is being provided (no meals);* • *payments under CPP, EI, WVA, QPP, Civilian War Pensions, OAS, Gains, Compensation for Victims of Crime;* • *all interest and dividends earned; and*	Currently, the application form contains a comprehensive list of income types which the applicant declares they are receiving or not. The applicant or participant (when updating) solemnly swears that the information given on the application form is true. Where an applicant or participant reports income received or pending, the case manager determines, with the client, when the income was or is to be received and for what period it is intended. (This can be determined by a pay stub, or by contacting the source of the income). Income is chargeable at 100% unless exempted. The case manager uses actual monthly amounts wherever possible rather than estimates or income averaging. The income of all other dependants who are not exempt is included when determining the amount of financial assistance payable. The 'Consent to Disclose and Verify Information' form, and other consent forms listed in Part III (g) Intake Verification Interview, are used to assist the case manager to determine exact amounts of income, dates issued, or expected to be issued, and periods intended. This is often done by contacting other agencies, and results in adjustments to assistance to account for these payments. See Part IV (b) Calculating Changes. The 'Rights and Responsibilities' form which is carefully read, explained and signed at the interview emphasizes the		The Form 1 lists general categories of income and Service Manager's Module for Child Care offers a more comprehensive list to guide staff through possible income sources. Income is calculated on a monthly basis in order to compare it to monthly budgetary needs. Average weekly and biweekly earnings are converted to monthly earnings. NET EARNINGS are calculated by subtracting allowable deductions including income tax company pension plans, CPP, EI and compulsory deductions from gross earnings. DNA regulations also allow for an exemption on net earnings of up to 25%. Individual CMSMs set their policy on this exemption. Any other sources of income are added to the calculation as income actually received or as an average monthly amount except those sources which are specifically excluded.	*All income from all persons in an RGI household must be declared for calculation purposes, except for income of students who attend school full time and are under the age of 26 yrs.* *GROSS INCOME-the combined income of every person residing in the unit and every member of the household temporarily residing somewhere else. This includes:* • *employment/social assistance/pension* • *income-producing assets* • *Non-income-producing assets* *(except income earned by dependants under 26 years, who attend a recognized learning institution full time)* *INCLUDED INCOME- means all income, benefits and gains, of every kind and from every source including but not limited to the following:* • *gross salaries, wages, overtime payments, commissions, bonuses, tips, gratuities;* • *grants, scholarships or bursary payments, (exempted are bursaries for direct education, child care, disability, etc.)* • *the gross annual income from any form of self-employment including an owned business less itemized business deductions as allowed by Revenue Canada, plus any capital cost allowance used as a deduction;* • *the gross amount of EI; the gross amount of WSIB, or other industrial accident insurance payments made because of illness or disability;* • *the gross amount of OAS, GIS, Spouses Allowance and financial assistance under GAINS;* • *the gross amount of any kind of pension, benefit and annuity whether from a federal, provincial or municipal gov't. or of any other country or state or from any other source;* • *the gross amount of alimony, separation, maintenance or support payments;* • *the gross amount of gains from investments including dividends, stocks, shares and other securities and, where the actual income cannot be determined, an imputed rate of return set by the ministry from time to time;* • *the gross interest income from savings or chequing*	When calculating GROSS MONTHLY INCOME of the household, only income that would be included in rent calculation (before deductions) is to be included. When assigning gross income amount to individuals on social assistance programs, e.g. OW or ODSP, the amount assigned will be the income that the individual/household would be receiving as public housing tenants/members, not the amount they are currently receiving, which includes a variable shelter amount. To establish this amount, providers LHAs will record the total of his/her basic allowance and any other earned income, plus the appropriate rent scale charge for household members covered by social assistance. See Part III (I) Calculating Assistance Certified income tax returns can be requested when: • the resident is self-employed or receives tips, bonuses, overtime and commissions; • the resident's declaration of private sources of income is not consistent with the amount of guaranteed income supplement received; • the resident's declaration of income changes significantly from year to year; or • the resident is suspected to have misrepresented his or her income A certified return is a copy of the resident's original tax return filed with Revenue Canada which has been validated by the local taxation office as a duplicate of the original return. The

PART III (l) Treatment of Income

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
- *proceeds of any loan* *TREATMENT OF INCOME* *The regulations stipulate income which is exempted. These include:* - *earnings and training allowances of dependent children or dependent adults in school;* - *a portion of the payment received from the sale or disposition of an asset to be applied to purchase of principle residence or other approved item;* - *Assistance for Children with Severe Disabilities (ACSD) payments;* - *death benefit under CPP or QPP;* - *B165 payments received from the WSIB;* - *Income tax payments;* - *Foster Child Payments received from CAS;* - *payments from the Department of Indian Affairs and Northern Development;* - *business loans as approved by the administrator;* - *loans for medically necessary health related expenses;* - *loans, gifts, bursaries or scholarships provided for education costs;* - *casual gifts or payments of small value;* - *inheritances and charitable donations;* - *payments for special services; and* - *awards for pain and suffering up to $25,000.* *Applicants and participants must pursue income which is available to them see Part III (o) Pursuing Other Income.* *OSAP-a single person attending post secondary education and in receipt of OSAP is not eligible for financial assistance.* *Any member of the benefit unit who attends full-time post secondary shall apply for financial support from OSAP for themselves and their families where*	client's responsibility to notify the case manager of any income or changes in income. The income amount and type of income is entered into CWT and loaded to CIMS to calculate the amount of assistance to be issued. The case manager may approve post-secondary education as part of the applicant/participant's participation plan. The case manager advises the applicant/participant that they must apply for student loans and bursaries and makes appropriate referrals or gives referral information. Portions of the student loan may be exempt. The case manager makes this determination as per the regulations and enters this data in CWT to determine eligibility. It is necessary for the case manager to be familiar with how OSAP disperses its loans, and how to calculate the amounts which are listed on the student's OSAP assessment summary, in order to enter the correct amounts onto CWT. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** - Calculation tool will identify if applicant/participant's income or assets is in excess - Third party checking will verify income - Income reporting may be done through an Interactive Voice Response (IVR) system			*accounts in a bank, trust company or a credit union;* - *the gross amount of interest earned or payable from bonds, debentures, term deposits, or investments, certificates mortgages, capital gains or lump sum payments or other assets;* - *an imputed income equal to the total appraised value of all assets or investments which do not produce interest income but are intended to appreciate in value or are given away, all of which must be declared by the occupant, -and are multiplied by the imputed rate of return . See also Parts III (k) Assets, (m) Earnings, and (n) Self-employment and Farm Income* *UNEARNED INCOME includes income from the following sources:* - *Employment Insurance Benefits and training allowances; annuities; pensions; disability payments;* - *Support payments; unearned student income* *INCOME PRODUCING ASSETS Includes:* - *Interest from accounts or investments; dividends; mortgage or loan income ; income from investments with financial institutions or corporations.* *Normally, the income from an asset or investment over the previous year is included in the gross family income for rent calculation.* *INTEREST INCOME: which is paid from accounts and investments such as:* - *Savings and chequing accounts ; term deposits; bonds or debentures; other sources.* *DIVIDEND INCOME: regular dividend income whether withdrawn or reinvested, is included in the rent calculation* *MORTGAGE OR LOAN: only the actual interest of any mortgage or loan payments received during the past year is included in the rent calculation. Repayments of the principle are not included as income* *JOINTLY OWNED ASSETS: only the income from the tenant/member's portion of the asset is used in the rent calculation.* *EXCLUDED INCOME:* - *income of children or dependants under the age of 26 in regular full time attendance at a recognized educational*	occupant's copy is not acceptable verification. The assessment notice from Revenue Canada would also be acceptable. It should be used to identify sources of income, rather than the current amount. An exception to this would be in the case of verifying self-employment income or income from tips, bonuses, overtime and commissions. See Part III (m) Treatment of Earnings EI-gross amount is considered, verified monthly by receipt of the EI benefits statement mailed with the rent cheque ANNUITIES-all payments included, to be verified monthly or annually, by viewing copies of cheque stubs or using verification of assets form. PENSIONS- all payments (gross) received are included, to be verified monthly or annually by viewing cheque stub, verification of assets form . DISABILITY PAYMENTS-verified bi-weekly for temporary compensation benefits and annually for permanent pensions. Verification by most recent monthly cheque stub, or letter from the pension source, or cheque stubs for temporary pension. The latter must be reviewed regularly for return to work. SUPPORT-gross amount considered. If not received on a regular basis, can grant mid-term rent reduction. Verified by copies of canceled cheques, copy of separation agreement or court order, or letter from lawyer or signed affidavit. STUDENT UNEARNED INCOME-scholarships, educational grants and bursaries are included in rent calculation for a student over the age of 26 yrs.

PART III (I) Treatment of Income

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
applicable through student loans. *Personal living funds are equal to the total student loan entitlement less allowable direct school costs (i.e. tuition, books, equipment and compulsory fees)* *The personal living allowance portion of OSAP is considered as income for the time period it is intended and is prorated against monthly eligibility.*				*institution, unless they are the primary tenants/members;* • *repayable student loans; living out or travelling allowance of any family member; family allowances; child tax credit; property and sales tax credits; tax grants for senior citizens; special disability allowance received by Gains-D recipients; handicapped child's allowance; attendant care allowance;* • *allowances/payments for child care, transportation, tuition, books or living away from home expenses of any participant in programs to promote employment or enhance job skills or qualifications i.e. OSAP;* • *income earned by a prepaid funeral plan; business expense deductions from gross self-employment income (Note: strike benefits is income, but not employment income – union not employer); support payments made by resident are forgiven on a monthly basis;* • *capital gains including: lump sum payments, such as insurance or WSIB settlements; lump sum payments from court awards; inheritances; the sale of effects; severance pay; and lottery winnings;* • *home care allowances, for example: foster child allowances, developmental care program payments (CAS); foster child/adult placement program payment (Metro Toronto); attendance allowance, normally received by the spouse of a disabled veteran in lieu of nursing home services; veteran's independence program payments; War Reparation Payments;* *For rent calculation purposes the previous year's income from income producing assets is used whenever possible. This income is divided by 12 to obtain a monthly amount (prorated for periods less than a year).* *For investments that have been recently acquired, the investment interest rate should be applied and future calculations should be based on the actual interest received by taking the previous year's interest income into future calculations.*	Student loans, grant portion for child care and living/traveling expenses are not included. Verified through letter of information on notice of award. Except for direct school related costs • OSAP bursaries • Child care • Disability

PART III (m) Treatment of Earnings

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Earnings and training exemptions in the Supports To Employment Program (STEP) have been established to encourage participants to seek employment and participate in training by allowing them to earn income and still receive part of their assistance. *STEP incentives:* • *a participant can qualify for STEP after three months of continuous assistance* • *net earnings are gross earnings after mandatory payroll deductions (EI, tax, CPP, mandatory pension and union dues)* • *basic exemption is the monthly flat rate exemption that is deducted from net earnings. It is determined by family size, e.g. single $143, couple $249, sole support with one child $275.* • *an additional amount of earnings may be retained based on a variable beyond the basic exemptions to be retained by the applicant or participant. The rate is variable and will decline by 5% for every cumulative 12 months on assistance with earnings, i.e. 0-11 months 25%, 60 months 0%.* • *child care expenses may be claimed monthly by applicants or participants to enable them to assume employment or participate in training programs. Actual amounts are allowed for formal child care and actual costs up to a ceiling are allowed for informal care. Children up to 12 years of age qualify.* • *Chargeable amount refers to the gross earnings minus the mandatory payroll deductions, minus the basic exemption and the retainable amount if allowed, and minus child care costs where applicable*	Currently, earnings and training allowances are reported and calculated monthly, to allow a 'real time' application of this income to be reflected in the financial assistance eligibility. Earnings and training allowances are recorded as actual amounts in the reported period, not averaged or estimated. Upon application the applicant must verify earnings by submitting pay stubs. Where earnings fluctuate, pay stubs over several weeks are necessary to determine the amount of initial eligibility. The case manager compares the pay stubs to income tax charts to determine the correct amount of tax has been deducted, and examines the deductions (EI, CPP, Income Tax Union Dues, Pension) in order to determine that only 'mandatory deductions' have been made. Where this is not the case, the net earnings are calculated using mandatory deductions only. This exercise is common practice every month when income statements and pays stubs are submitted. See Part IV (b) Calculating Changes. Miscalculations result in over/underpayments, which must be rectified. See Part IV (i) Recovery of Overpayments. Receipts for child care expenses accompany the declared earnings in order that proper deductions can be made. Where the client is in a training program, attendance records may be requested to compare attendance and child care claims. Earnings and deductions are coded, and entered into the CIMS system which rechecks the amounts before calculating and issuing the entitlement.	*Net earnings are listed on the Form 1.* *CMSMs can exempt up to 25% on net earnings* ***On the Form 1 other income is added to net earnings*** ***(see Part III (l) Treatment of Income)***	Staff would establish the level of net earnings taking into account mandatory deductions. The Provincial guidelines state that net earnings are calculated by subtracting allowable deductions from gross earnings. Allowable deductions to determine net earnings include income tax , company pension plans, Canada Pension Plan (CPP), Employment Insurance and compulsory deductions. Deductions to pay for saving bonds, credit union savings, garnishees and payments on loans are not subtracted from gross earnings when calculating net earnings. In the majority of cases CMSMs use the 25% exemption but often a ceiling is applied (e.g. 25% up to a maximum of $500)	*EARNED INCOME is money received from employment and self-employment. Types of earned income are:* • *regular employment income;* • *irregular or seasonal employment income;* • *overtime, bonuses, tips, and commissions;* • *self-employment income;* • *student earnings;* • *employment insurance* • *short term WCB* *Social assistance recipients who take part in STEP must include the total amount of employment related income, and income from any other source.* *Note: This is all part of the non-benefit. If the amount exceeds the threshold – then the RGI ratio is applied to the non-benefit income, less any applicable allowances e.g. employment. The Social Assistance income is not included.* *EARNED INCOME EXEMPTIONS* • *all primary tenants/members with earned income are eligible for the employment related exemption; $75.00 single or $150.00 family* • *secondary tenants/members under the age of 26, who are not in full time attendance at an educational institution, are eligible for the exemption provided they have income from an earned source* • *if there are dependants, and at least one primary resident has earned income, the monthly exemption i.e. $150.00* • *if there are no dependants, each primary resident with earned income is entitled to a monthly exemption of $75.00* • *eligible secondary tenants are entitled to an exemption of $75.00 if option 1 of the RGI scale is used in calculating the charge*	• regular income must be verified annually, unless there is a change of income. • regular income must be verified annually, unless there is a change of income. • irregular or seasonal employment income: the RGI for residents with irregular or seasonal employment have their rent/occupancy charge based on their average income over the past 12 months. Acceptable forms of verification for regular employment income include: • employment verification Form 1 (preferred method in LHAs) ; • employer letter including: company's name and address, phone number, employees name, pay period, the gross pay amount. • consecutive pay stubs including: the companys name, employee's name, the pay period, the gross pay. • student income should be verified every 12 months if in attendance at a recognized school. If the student is employed for less than 12 months, use the actual or anticipated income for 12 months based on a minimum of 8 weeks earned income. Proof of full time registration in an educational institution may be requested. • Residents who are locked out by their employer should have their rent/housing charge recalculated and rent adjustment issued based on the lower income amount • verification of tips/gratuities/ commissions must be reviewed on an

PART III (m) Treatment of Earnings

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
	The system produces payment information which details the calculation of the benefit amount to the case manager (kept on file) and to the client profile. **BTP KEY CHANGES**: will streamline the monthly reporting process and introduce the use of Interactive Voice Response, (IVR) to automate income reporting.			*EXCLUDED INCOME* • *home care allowances for example: foster child allowances, developmental care program payments (CAS); foster child/adult placement program payment (Metro Toronto); attendance allowance, normally received by the spouse of a disabled veteran in lieu of nursing home services; veteran's independence program payments;* *For rent calculation purposes the previous year's income from income producing assets is used whenever possible. This income is divided by 12 to obtain a monthly amount (prorated for periods less than a year).* *For investments that have been recently acquired, the investment interest rate should be applied and future calculations should be based on the actual interest received by taking the previous year's interest income into future calculations.*	annual basis and verified separately. To verify the annual amount of income from these sources, obtain a certified copy of the resident's most recent income tax or assessment notice. • OHC only – all tenants must provide income tax information on an annual basis (e.g. copy of certified return of assessment form, etc.)

PART III (n) Treatment of Self-employment and Farm Income					
ONTARIO WORKS		**CHILD CARE**		**SOCIAL HOUSING**	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Self-employment - means work in a business that the person directly or indirectly operates and controls but does not include work a person carries out as a dependent contractor or in which he or she is remunerated by commission. Self-employment as an option to job searching must be approved by the administrator. *BUSINESS RELATED ASSETS may be exempted and are specified in the regulations. They include: tools of the trade, assets that are necessary for the operation of a business up to $10,000. or as approved by the administrator.* *INCOME shall be determined for a month by adding the total amount of all payments of any nature paid to or on behalf of, or for the benefit of every member of the benefit unit. Income includes the monetary value of items and services provided to the members of the benefit unit as well as amounts of income deemed to be available to members of the benefit unit.* *NET BUSINESS INCOME means the gross business revenues less approved expenditures and must be reported on the business income and expense report. Once this has been determined by the case manager it is subject to exemptions (the participant must be in receipt of assistance for three months to qualify).* *TIME FRAME-when the business is developed as an alternative to job searching, the participant must have a business plan filed by week 8 of the job search exemption.* *FARM INCOME* *Budgetary requirements and income declaration apply to applicants/participants who claim farm income as they do to any other applicant/ participant.*	Self-employment Currently, due to the variable nature of self-employment activities, many delivery sites employ a designated self-employment case manager, or seek local expertise in working with these cases e.g. self-employment development agency. The case manager must be able to distinguish between individuals who are considered self-employed and those considered employees. In cases where it is unclear, an employment status assessment is completed with the client. This assessment is based on case law and Ontario Labour Law utilizing a five part employment test. The case manager is required to assess the client's employability as well as an assessment or determination of the viability of the business idea as an alternative to the job search requirement. The case manager reviews the plan to determine the viability of the business idea and reviews the calculations of net business income, appropriate business expense deductions, and ensures that allowable levels are maintained. SELF-EMPLOYMENT INCOME is reported monthly using forms in the self-employment record keeping kit. Verification of net income includes reviewing the cash receipts and disbursements journals, bank accounts and cash records, accounts payable and receivable records. Required forms are on file to verify the net business income and only approved business expenses and loans are allowed. In order to successfully monitor self-employment cases it is important that the client understand the requirements for eligibility. The case manager uses the following forms and information to ensure that policy guidelines are implemented effectively: • Business Assets Review (Form 2794) • Business Income and Expenses Report (Form 2792)	*Provincial guidelines recognize that calculation of income for some groups can be complex particularly income of farmers, self-employed persons and students. Farmers and other self-employed persons who demonstrate financial hardship in accordance with the needs test are eligible to receive fee subsidy.* *There are no overall provincial standards or forms for calculating the income of self-employed applicants or farmers.*	Self-employed persons are required to provide sufficient financial income records, e.g. previous year's income tax return and financial statements to determine the net income derived form an interest in, or operation of, a business. In most cases CMSMs have established procedures and specialized forms to review and verify financial statements for self-employed individuals. This can often be a very complex process and may require access to specialized expertise (e.g. accounting knowledge to read financial statements, analysis of client's income based on commission or bonus systems, etc.). In larger municipalities specific staff may specialize in these cases.	*Income from a business owned by a tenant/member, a partnership, or any other form of self-employment is included in the rent calculation.* *Assets and money tied up in a self-employed business should not be separately considered as assets, unless the resident is paying himself interest.* *If another household member is receiving income from an investment in a family business, the asset is treated as an income producing asset.*	Residents who are self-employed should be asked to provide an audited financial statement. Self-employed income is considered to be: • the amount of withdrawals for personal salary plus the net income or; • where a salary is not drawn, the net income of the business less all business expenses allowed by Revenue Canada. The statements must include a declaration by a professional accountant that the financial statement is accurate. If the resident is self-employed for less that one year, they must provide a statutory declaration which states the income anticipated to be received during the 12 months following admission/verification. A forecast from an accountant is also acceptable. This amount should subsequently be verified by obtaining a certified copy of the income tax return or assessment notice. SELF-EMPLOYMENT ASSETS and money tied up in a self-employed business should not be separately considered as assets, unless the resident is paying himself interest. This is because the effect of such assets is already reflected in the net self-employment income. If the net annual income is negative, no income from self-employment is included. Self-employed income is verified every 12 months. If the tenant/member is self-employed for less than one year,

PART III (n) Treatment of Self-employment and Farm Income

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
No participant remains eligible as a self-employed farm operator for a period greater than 60 weeks. Farm income is calculated using net income, (gross farm income minus farm expenses). Farm income is usually received during 2 or 3 months of the year. Since income is money received only during the current month, the income received during peak periods cannot be averaged over a longer period of time. The balance of such income once received is considered liquid assets. *A six month grace period is allowed for liquidation of assets from a farm.*	• Instructions for the Completion of Business Income and Expense Report (Form 2793) • Record Keeping Requirements for Report ing Business Income (Form 2787) • Request for Approval - Business Loan Expense (where applicable) (Form 2789) • Request for Approval – Reinvestment Expense (Form 2790) [where applicable] The 'Consent to Disclose and Verify Information' provides for disclosure and consent. With this document the client agrees to supply the case manager with information sufficient to make a reasonable assessment of business progress. FARM INCOME The case manager must justify continued operation of the farm as an alternative to job searching. The duration of the request for assistance should be considered when requesting the applicant/participant to rent out portions of land not under cultivation. A Revenue Canada statement of farming income and expenses is used to determine income. All farm income is monitored on a monthly basis and revenues and expenses are reported on appropriate forms used for self-Employment. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** BTP will support current practices.				the actual or anticipated income for 12 months following admission/verification is used.

PART III (o) Pursuing other Income and Assignments

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
PURSUING OTHER INCOME - if the administrator is not satisfied that a member of the benefit unit is making reasonable efforts to obtain compensation or realize a financial resource or income that the person may be entitled to, or eligible for, the administrator may determine that the person is not eligible for basic financial assistance or reduce the amount of basic financial assistance granted by the amount of compensation, financial resource or income that in his or her opinion is available or would have been available had reasonable efforts been made to obtain or realize it. *ASSIGNING INCOME - an administrator shall in prescribed circumstances, as a condition of eligibility for basic financial assistance, require an applicant, a recipient, a dependant or a prescribed person to agree to reimburse the administrator for the assistance provided or to be provided.*	PURSUING OTHER INCOME - Currently where, during the course of the application or file review, the case manager is aware of income the applicant/participant or their dependants may be entitled to, the case manager will advise the client of their obligation (a condition of eligibility) to pursue this income and a reasonable time frame to do this will be given. The case manager will document this activity in the narrative section of CWT with an appropriate BF. An assignment of benefits, suitable to the source of income i.e. EI, CPP, family support etc., will be completed to ensure that funds forthcoming are reflective of the date of assistance (a copy of the assignment, as well as full explanation of the process is given to the client, one copy to the income source, with proper consents, and a copy retained on the file). In the case of family support the case manager will refer the applicant/participant to the family support worker who will assist the client with initiating, reinforcing, updating or assigning the court order to the OW office. The case manager is responsible to ensure that money due and owing is followed up and that repayment is made for the appropriate time period in an amount not to exceed the financial assistance paid to the client. In cases where assignments are not honored or reimbursement is not received by the delivery site, (but has been received by the client) for periods where the applicant or recipient received financial assistance, an overpayment results. See Part IV (i) Recovery of Overpayments. **BTP KEY CHANGES** : will improve the assignment process through: • enhanced on-line notes • automation of third party information sources • specialized BF's • This process outlines the steps involved when a client/participant identifies a potential source of income that may require an assignment of benefits. The administration of benefits includes ensuring that the client has applied for the third party payment, contacting the third party in question to determine the status of the application and providing additional information to the third party (i.e. amount of assistance issued). The worker must then follow-up with the client and the third party until all payments have been received. • The potential to verify income using 3rd party interface, will allow the worker to make a better determination of the outstanding funds owing and to determine what amount is being received by the client.	*For separation, alimony or child maintenance payments, eligibility does not depend on the actual receipt of support payments, however there is an expectation that efforts are being made to obtain compensation.*	Applicants are expected to provide a copy of a court order and realize any financial resources to which he or she or their dependant may be entitled. The CMSM/administrator may want to address the importance of taking action to obtain support payments (e.g. may use parental support workers) unless extenuating circumstances exist (such as situations of family violence). Default payments need to be addressed through the Family Responsibility Office.		RENT/OCCUPANCY CHARGE DEFERRAL • is a way of dealing with a difficult financial situation caused by a delay in income. Deferral is different from forgiveness because the deferred rent/occupancy charge is expected to be repaid when the delayed income is received. Rent/occupancy charge deferred is always partial, because the rent/occupancy charge can never be reduced below the minimum amount ($32.00). Rent/occupancy charge deferrals caused by the delay in expected income requires a written deferral agreement specifying; • reason; • amount of the deferred rent/occupancy charge; and, • the expected date of repayment There are two basic types of rent/occupancy charge deferrals: 1. Deferral based on the delayed sale of residence; 2. Deferral based on hardship (i.e. lengthy delay in receipt of OAS cheque) The occupant may seek approval of a rent/occupancy charge deferral by the p-rovider. The provider may determine that the financial hardship still exists after the deferral agreement expires. In this case, the non-profit corporation/co-operative may extend the agreement for another fixed period, subject to the occupant continuing to be eligible for RGI housing and review of the financial hardship . See Part IV (i)Recovery of Overpayment/ Arrears.

PART III (p) Client Notification

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The process for notification of eligibility or ineligibility must be completed in a timely manner. Once the applicant provides all of the required information to make a determination, a decision must be completed within four working days and the applicant must be notified. The applicant must be provided reasonable time to provide outstanding information necessary for determination of eligibility. Factors to consider when setting a time frame include access to the required information, whether the information is in the control of the applicant, and the time necessary to complete access. *Given these considerations, a reasonable time frame has been determined to be 2 to 10 working days from the date of application for the applicant to mail or bring required documents plus the four days allowed to make a decision of eligibility. In extenuating circumstances the time frame may be exceeded. The applicant is advised of, and understands, his or her responsibility to provide the outstanding information within the designated time. See Part II (a) Intake and Initial Screening.* *At the expiration of this period, a decision must be made and notification provided to the applicant. If the applicant is eligible for assistance, mandatory items are to be provided to the applicant.* *Where the decision is ineligibility, the administrator shall give notice to the applicant or recipient of the decision that may be appealed and the notice shall advise the applicant/recipient that he or she may request an internal review. See Part III (q) Dispute Resolution/Appeals .*	Currently, the case manager must make an eligibility decision within the required time frame. This often entails ensuring that third party information has been received and considered. After information about maintaining eligibility, such as how to complete the income reporting statement, has been explained at the interview, the next step is to issue the allowance. The cheque, with cheque stub explaining the amount and deductions (where appropriate), a drug card and the income reporting statement are mailed to the applicant, within the required time frame. Where the delivery site is using direct banking deposit, the assistance is deposited in the client's bank account and they receive the other information by mail. For decisions to reduce, suspend, or cancel benefits, notification must be sent. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: • Notification will be supported through BTP	There are no provincial standards or regulations.	Generally client names are put on a waiting list before a full Form 1 is completed. Only when the client is close to the top of the waiting list is the Form 1 completed and an applicant is made aware of their financial eligibility. Some CMSMs may do an assessment earlier if there is some doubt whether a client should be on a waiting list. In virtually all CMSMs if a family is approved for subsidy, a formal letter goes out to the client and the provider. Most child care centres require confirmation in writing of the level of subsidy and the parent contribution. There can be pressure from both parents and child care centres to fill vacant spaces and sometimes initial confirmations are done by telephone and followed up with a formal letter. In most cases ineligible clients are informed verbally. This is followed up with a letter and a copy of the completed Form 1 to indicate why the client did not meet the financial test. The Service Manager's Module for Child Care has automated the correspondence giving applicants and service providers confirmation of the level of subsidy along with any required parental fees. Some CMSMs have already established their own automated correspondence systems.	*The Tenant Protection Act requires that RGI tenants/members receive 90 days written notice of rent increase, for non income related increases. The co-operative operating agreements also require that the occupancy charge be adjusted upon 60 days written notice for members and such period as provided by law for non-members.*	*The operating agreements are between the housing provider and the MMAH. Some agreements specify 90 days notice for all rent increases. However, the provider has discretion in this area as long as both parties agree to the change. Therefore, if the housing provider wishes to implement the new policy, (New Policy –Directive 98-08; Where a rent/occupancy charge increase is due to an increase in the income of the resident, the rent/occupancy increase shall be effective on the first day of the second month following the month in which the income is increased) the Ministry will not consider this to be a breach of the operating agreement.* *TIMING* • *the Tenant Protection Act ,TPA requires that a tenant/member receive written notice of a rent increase at least 90 days before the effective date if the rent increase is related to a non-income reason (e.g. utility charges change, or parking increases). If the tenant/member's income increases, the rent will be increased on the first day of the second month following the month the income increased. To ensure adequate time for the calculation of the rent and notification to the tenant/member, the annual review should start at least 120 days prior to the anniversary date.* *Co-ops are required to give written notice of a housing charge increase to members at least 60 days before the effective date. To ensure adequate time for the calculation of the housing charge and notification to the household, the annual review should start at least 90 days prior to the anniversary date. See Part IV (b) Calculating Changes to Rent.*

PART III (q) Dispute Resolution/Appeals

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The administrator shall give notice to the applicant or recipient of a decision that may be appealed and the notice shall advise the applicant or recipient that he or she may request an internal review of the decision. *Any decision of an administrator affecting eligibility for, or the amount of, basic financial assistance, other than a decision excluded by the regulations, may be appealed to the Social Benefits Tribunal (SBT).* *The onus lies on the appellant to satisfy the tribunal that the decision of the administrator is wrong.* *The Tribunal may direct the administrator to provide the prescribed interim assistance to an applicant or recipient if the tribunal is satisfied that the person will suffer financial hardship during the period needed for the tribunal to complete its review and give notice of decision.* *If the amount of interim assistance provided exceeds the amount that would have been payable under the final order of the tribunal or court during the period for which interim assistance was provided, the amount of the excess shall be deemed to be an overpayment* *Types of decision which may not be appealed to the SBT are decisions:* • *about employment assistance that does not affect eligibility for or the amount of income assistance or a mandatory benefit;* • *respecting discretionary benefits;* • *to provide a portion of basic financial assistance directly to a third party;* • *to appoint a person to act on behalf of an applicant;*	Currently, the regulations prescribe time lines within which the internal review and the appeal to the Social Benefits Tribunal must be completed as well as how the steps in the process are to be documented. 1. When a decision has been made affecting a client's initial or continuing eligibility, the information is sent to the client from the case manager, clearly outlining the reasons why the decision was made, and the client's recourse to appeal within 10 days from receipt of the letter. (Information regarding the closest legal clinic is also given to assist the client with this process). 2. The client must respond in writing outlining their objection, and requesting an internal review within the time frame (10 calendar days after which the applicant or participant has received the decision of the administrator. The time can be extended where the timeline was missed through reasons beyond the person's control and an appeal can be initiated afterward). The reviewer (a person not connected with the original decision), then reviews the file, and at this time may request further information from the client, or another source in order to make their determination within 10 days. If there has been no decision within 10 days the client may appeal to the Social Benefits Tribunal. The results of this decision are clearly communicated to the client in writing, and, if this decision is subject to appeal by the tribunal, directions on how to proceed are given to the client in writing. The reviewer is required to document their decision and the factors contributing to that decision. If the client chooses to appeal to the tribunal, this information is sent to the tribunal, as part of the administrator's submission, along with physical exhibits and intention to call witnesses (if	*There is no province wide structure for appeals.* *Provincial guidelines suggest that as a best practice CMSMs should establish and communicate their own internal policy regarding complaint and appeal processes. These may include:* *-parental knowledge of internal review and appeal processes* *-all requests for internal reviews are in writing* *-time lines for the decision-making process of internal appeals are outlined* *-staff are trained on processes* *-decisions are communicated in writing and reasons for decisions are provided*	CMSMs establish their own internal review procedures/policies. Generally the client appeals to the unit supervisor and possibly to the director or municipal commissioner. In some cases they may go to the provincial regional office or their local elected representative. Families may choose to appeal the interpretation of the rules as it applies to their situation. As well they may wish to appeal the rule itself (e.g. treatment of OSAP as income).	*RECONSIDERATION OF DECISIONS:* *When applicants or residents feel that they have been treated unfairly, discriminated against or bypassed on the waiting list, their complaints must be heard and resolved. Housing providers are to establish a process to review requests from:* • *residents denied internal transfers* • *applicants denied housing* *The procedures that the housing provider establishes must be available to applicants/residents in writing, and shall meet the following conditions:* • *reconsideration must be performed by a person or group of persons other than the person(s) who made the initial decision and is in a more senior position than the original decision maker(s).* • *entitle applicants or residents to represent themselves or authorize someone else to represent them* • *ensure the process respects the privacy and confidentiality of the applicants/residents* • *convey all decisions to applicants/residents in writing, including a clear statement of the specific reason(s) for the final decision* *INTERNAL REVIEW* *Non profit providers are required to have an internal appeal process. This process will vary by the provider, depending on the policies of the Board.* *OHC has an internal appeal system for internal intake disputes.* *Applicants and tenants have the right to appeal decisions made by the Local Applications Review Committee (LARC), other LHA committees, or staff, to an Internal Review Committee.* *Tenants have the right to appeal a Notice of Termination, except for arrears.* *Appeals for evictions are covered during legal proceedings. For example tenants may appear at the legal hearing and request a "stay" through the court, after a judgement is received.*	

PART III (q) Dispute Resolution/Appeals

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
• *about a variation, refusal or cancellation of basic financial assistance caused by an amendment to the Act or the regulations;* • *respecting emergency assistance;* • *prescribed under the regulations (section 68); and* • *respecting orders in council issues identified in the Regulations as not appealable*	appropriate). The client has 30 days to file an appeal with the SBT. Clients may not appeal to the SBT unless an internal review has been requested and the time for completing an internal review has passed. 4. Financial assistance may be ordered by the SBT on an interim basis to clients appealing a decision. Interim assistance must be issued immediately if the administrator finds that the client meets all eligibility criteria other than those under appeal. The SBT advises the client within 60 days and both parties are advised. 5. Where either party disagrees with the Tribunal's decision, they can request the tribunal to hold a reconsideration hearing. Tribunal decisions can also be appealed to Divisional Court. This appeal process establishes a rigorous process for addressing disputes over decisions affecting eligibility and the amounts of assistance and benefits. It supports consistent and fair application of eligibility rules. See Part IV (i) Recovery of Overpayment / Arrears, for late repayments of overpayment amounts for cases no longer in receipt of Ontario Works. **BTP Key Changes**: • Decisions of ineligibility may be made at intake screening with a complete application. The applicant will be provided with verbal and written notification of the ineligible reason and right to an internal review and appeal.			*Each LHA must establish an internal review procedure for:* • *internal and external applications denied active waiting list status;* • *tenants denied priority status for transfers, i.e. urgent status or special priority status;* • *tenants denied status on portfolio management list.* *The review is to be conducted by an Internal Review Committee (IRC), whose decision is final. The LHA will determine the composition of the IRC. The committee is to have representation from the Board and senior LHA.* *Upon receipt of a request for an IRC review, the following activities are to be completed:* • *arrange a date for the review within 60 days of the request;* • *prepare a report summarizing all pertinent information on the applicant/tenant but do not make recommendations. The report must be supported by documentation that is on file, new information submitted by the applicant or tenant;* • *provide a copy of the report and written reasons for denying the original request, to each member of the IRC and the applicant/tenant.* *Review Process:* • *the review is to be heard by the IRC and senior support staff, such as a recorder/secretary or legal counsel;* • *the applicant/tenant may appear in person, be represented by an agent, or be accompanied by an agent. If the applicant/tenant or their agent does not appear, the IRC will proceed with the review and make a decision;* • *the IRC will consider among other factors the eligibility of the applicant for subsidized housing and the suitability of the applicant/tenant. In evaluating suitability, the committee shall consider the degree of risk involved in maintaining the safety, security and well-being of other tenants;*	

PART III (q) Dispute Resolution/Appeals

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
				• *the minutes of the IRC will record the decision and the reason(s) to support it;* • *a letter is to be sent to the applicant/tenant within two weeks of the date of the hearing informing them of the decision, and including reasons for denying the request, if applicable;* • *an application or request may be re-submitted, only if circumstances have changed or new information is available; the LHA has the right to determine how soon after an appeal that an application may be reconsidered;* • *if the IRC is composed of fewer than the whole LHA Board, the IRC decision must be tabled at the next meeting for their information.* *INELIGIBLE APPLICANTS* *If an applicant is deemed ineligible for public housing, the applicant is to be advised in writing of:* • *the reason for ineligibility;* • *the option to appeal the decision;* • *the option to reapply if their circumstances change.* *Files of ineligible applicants are cancelled. These files are retained according to current retention schedules.*	

PART IV (a) Verification, Updates and Monitoring

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The administrator shall determine that a person is not eligible for income assistance if the person fails to provide the information required to determine initial or ongoing eligibility. *The director may require that a member of a benefit unit provide monthly reports to the administrator regarding:* • *income and assets of members of the benefit unit,* • *attendance at employment related activities,* • *any other conditions relevant to determining the person's eligibility, and* • *new or changed circumstances.* *If a person is required to complete and return a monthly report, and fails to do so, the administrator may determine that the person is ineligible for income assistance.* *Financial eligibility reviews are completed every twelve months; employability reviews are conducted every three months. This includes updating the Participation Agreement. An 'Application for Assistance' is completed at each review to update the participant's file. Priority is given to cases that demonstrate high potential for inaccuracy e.g. high shelter costs. See Part IV (e) Risk Assessment Tools.* *The Rights and Responsibilities Form is reviewed with the participant every 12 months.* *Persons whose assistance is denied, canceled or reduced for three or twelve months due to non-compliance with participation requirements will need to reapply or request reinstatement after the expiration of the time period, as well as meet the requirements. If the participant relocates to another municipality, the conditions of ineligibility remain. These conditions are tied to the participant not the site . See Part IV (q) Dispute Resolution.*	Currently, monitoring of eligibility occurs on a monthly, as well as annual basis. Participants submit monthly 'Income Reporting Statements' which include a signed accounting of all income, changes in assets and in living arrangements, during the prescribed monthly period. If there are no changes, the participant is required to indicate 'nil' in each specific field on the form. Leaving a 'box' blank is not acceptable practice. Information regarding participation in employment activities is also monitored. The delivery site determines the reporting period e.g. January 16 to February 15. The case manager enters this information into the system and the system produces entitlement for March 1. Changes to entitlement due to fluctuations in income etc. are considered to be made in 'real time'. The case manager compares the declared information against last month's profile, to determine if declared information is consistent with past declarations. For example, if wages are substantially lower, the case manager would contact the client to determine why. If the client was ill, they would note the length of the illness, expected date of return to work, and look for changes in income to reflect this information. If there were no wages, the case manager would contact the client to determine if there was a lay off, or if the client quit or was fired. In the latter two cases, an ineligible ruling may be made after the case manager investigates the circumstances. See Part IV (q) Dispute Resolution. Eligibility reviews can be conducted by telephone, at the participant's home, at the local office or at an alternate site. The privacy of the participant is maintained. Where circumstances change which affect financial eligibility, the case manager is responsible for verifying the information, if necessary, and adjusting eligibility including establishing an overpayment, and recovering monies owed where required. See Part IV (i) Recovery of Overpayments / Arrears. Case managers are expected to respond quickly with decisions regarding eligibility. The monitoring process includes:	*In keeping with Ministry policy and practice, individual files must be reviewed at least once a year. CMSMs are encouraged to establish a policy regarding the effective date for case file reviews. It may include reviewing files based on the child's age and associated change in programming as well as expected changes in circumstances for students.*	There is no standard form or process to establish or monitor the family's ongoing need for child care. CMSMs establish their own policy/procedures on how long a parent(s) can be out of work or school before child care subsidy is withdrawn. They may also establish policies for absences such as holidays or illness. CMSMs use discretion in providing the amount of child care that reflects the time the parent spends in employment/school. Applicants must notify the administrator of any significant changes in their financial or family situation that may alter their eligibility. Some CMSMs have established their own "Rights and Responsibilities" form that clients must read and sign.	*Income declarations must occur prior to move in and at least once a year or more often if there are interim changes in the income or composition of the RGI household.* *The date for this review is commonly called the anniversary date.* *This ANNIVERSARY DATE can be set as either:* • *the date the household took occupancy of the unit; or,* • *one date for the entire project that coincides with the provider's year end.* *(Note: Under the TPA tenants/members can receive a 3 month notice – unless the rent increase is due to an increase in the tenant/member's income).* *The ANNUAL REVIEW consists of:* • *the distribution of an income declaration form to each RGI household;* • *receipt of the completed income declaration with supporting verification from each household;* • *calculation of the household rent/housing charge; and* • *notification to each household of the new rent/housing charge.* *Units where minimum rent is charged must be reviewed on a regular basis. Every six months is recommended.* *Information required in an income review includes updating the list of all members of the household;* *-names of all members (to confirm changes to household composition);* *-relationship to the primary tenant/member (to verify secondary age earner status, student exemptions, etc.);* *-birth dates (to confirm student exemption, eligibility for pensions, etc.).* *This includes dependants as well as the primary and secondary tenants/members. The occupant(s) should acknowledge that they have read the "Definitions of Income" and that the information provided by them is accurate and complete.*	The date for income and asset review is commonly called the anniversary date. This anniversary date can be set as either: • the date the household took occupancy of the unit; or, • one date for the entire project that coincides with the housing provider's year end. The annual review consists of: • the distribution of an income form to each RGI household; • receipt of the completed income declaration with supporting verification from each household; • calculation of the household rent/housing charge; and • notification to each household of the new rent/housing charge.

PART IV (a) Verification, Updates and Monitoring

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	• a review of the file and completion of the verification checklist to remind the case manager of outstanding information requirements and issues to follow up; • clearly advising the participant of changes to their eligibility (financial and employment expectations); • clear communication of client rights and responsibilities. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL** : • the case manager will be flagged by the system when required documents are not provided, including overdue reviews, required verification, annual cost of living increase etc. • enhanced online notes will assist the case manager in tracking changes, BF activity and appeal status, • streamlined income reporting process, • automated calculation of benefits will ensure that decisions are made faster and with greater accuracy, • budget calculation reports will be available immediately on the desk top to communicate calculation and changes to the participant, • financial eligibility determination will be 'system' driven, • program and case file review standards will be supported by new processes and technology • monitoring will move from a "time based" method i.e. every twelve months, to a "risk based" system depending on the risk factors present in the case • participants and clients will have the opportunity to enter income directly through an Interactive Voice Response (IVR) system. Verification of income reported by the participant through an IVR will be based on risk factors and defined exceptions. The administrative efforts required to record and verify income reports will be reduced. • Participants and clients will have the opportunity to access case information through the IVR. Clients will be serviced effectively with faster access to commonly requested case information. Also, the administrative effort associated with responding to client inquiries will be reduced. • Financial eligibility reviews to verify on-going eligibility and			*Tenants/members must provide verification of income prior to their annual review. The law requires that tenants/members receive 90 days notice of a rent increase for non-income related rent increases only; therefore the annual review should be completed at least 120 days prior to the anniversary date. Notification of the annual review should include a specific date for returning the information. See Part III (p) Client Notification.*	

PART IV (a) Verification, Updates and Monitoring					
ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	assistance will be completed using a standardized process. The process will incorporate priority-ranking factors that will be used to determine when cases should be assigned for review. Staff will have access to 3rd Party information to verify participant/client information and circumstances and will be supported throughout the process by the system. Once a case is assigned for review and the 3rd Party Interface information has been gathered, staff will decide the type of review that will be completed. A case can receive an abbreviated review or a full review. • Key changes will result from the implementation of the Service Delivery Model related to Income Reporting. Participants/clients will be required to declare all income received or to be received by any member of the benefit unit. Declarations regarding income will be used to re-calculate eligibility. Participants / clients with no income or simple earnings/income will declare via IVR. Participants / clients with complex earnings or income as well as those unable to use IVR will declare via income statements. Income verification will be completed on a risk basis where priority ranking criteria will determine when verification is required. • Personal information will be accessed using a PIN which will provide the security required to satisfy Freedom of Information and Protection of Privacy issues. One PIN will be issued to each benefit unit and the designated head of family will ultimately be responsible for declaring earnings for all members of the benefit unit and ensuring that the PIN remains confidential. There will be processes in place to deal with lost or forgotten PINs.				

PART IV (b) Calculating Changes to Benefits/Subsidy/Rent

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
If an applicant, recipient or dependant fails to comply with or meet a condition of eligibility in this Act or the regulations, the administrator shall, as prescribed: *-reduce or cancel assistance or that part of it provided for the benefit of the person who has failed to comply.* *The amount of income assistance for a benefit unit shall be calculated on a monthly basis by determining the budgetary requirements of the benefit unit, reducing that amount by the income of the benefit unit determined in accordance with the regulations, and accounting for any other change in circumstances.* *Income shall be determined for a month by adding the total amount of all payments of any nature paid to, or on behalf of or for the benefit of every member of the benefit unit during the period determined by the Director.*	See Part III (i) Calculating Assistance. The process for calculating assistance is repeated each time new information which affects financial entitlement is added. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: • automated calculation of benefits will ensure that decisions are made faster and with greater accuracy, • Budget Calculation Reports will be available immediately on the desk top to communicate calculation and changes to the participant • financial eligibility determination will be 'system driven'.	*Where applicants' circumstances change, files must be reviewed immediately.* *For policy changes that may result in an applicant/recipient becoming ineligible, the CMSM may want to extend a transition or grace period, not less than six months, to enable families to adjust to the change in financial assistance.*	A new Form 1 must be completed to calculate the revised subsidy amount, if any.	*Tenants/members are required to report any income changes, up or down, to the provider. Changes to the rent will be made immediately in the case of a decrease, or in the case of an increase, in the second month following the increase. These changes are when the change in rental amount is greater than $10.00 (increase or decrease). Residents reporting an increase or decrease in income, during the year, that results in a rent change of $10.00 or more, should have their rent recalculated. Rent increases require 90 days written notice , unless the rent increase is due to an increase in the tenant/member's income.* *INFORMATION REQUIRED IN AN INCOME REVIEW* *List all members of the household including:* • *names of all members (to confirm changes to household composition);* • *relationship to the primary tenant/member (to verify secondary wage earner status, student exemptions, etc.)* • *birth dates (to confirm student exemption, eligibility for pensions etc.)* *For "in year" changes, income must be verified. See Part IV (a) Verification, Updates and Monitoring.*	There are no special forms to use to notify the effective date of the charge increase when the increase is due to an increase in income. A letter to the tenant/member advising the amount of the new rent/occupancy charge and the effective date of increase is sufficient. In order to provide consistent treatment for all RGI residents, and for administrative simplicity for housing providers with operating agreements under the various housing programs, housing providers may implement the following for all of their portfolio: • initiate mid-year rent/occupancy charge increases/decreases if the change is $10.00 or more; and • increase the rent/occupancy charge determined at the annual income verification.

PART IV (c) Case Management and Tenant/Member Relations

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
Decisions in managing participation in Ontario Works reflects the following principles: • *supports the individual in the shortest route to employment;* • *provides resources to those most in need;* • *matches participants with available opportunities based on their skills, experience and circumstances providing a 'best fit' at any time and value added for the participant;* • *ensures accountability of service delivery agents to provide participants with opportunities to become employed; and* • *responds appropriately to changes in participant's circumstances, i.e. temporary deferral.* *The following standards for delivery must be adhered to;* • *case managers return phone calls and messages within two working days and respond to written requests within five working days;* • *case managers have knowledge of local labour market and available resources to support participants;* • *case managers have knowledge of other federal and provincial employment measures;* • *participants are informed at the time of application and on review of the range of employment assistance activities available to them and of the opportunity to propose their own participation plan and modifications to it; and* • *Participation Agreement reflects the current expectations and status of the participant's participation.*	Currently, case management and eligibility monitoring occur concurrently and are interactive determination functions. See Part IV (a) Verification, Updates and Monitoring for frequency of eligibility reviews. Case managers have a dual role, monitoring financial eligibility and assisting the participant to become self sufficient through employment. Case management involves the following functions. (These may be carried out by one case manager, or some functions may be referred to 'in house' or 'purchased' expertise in the community). • Employment assessment. How job ready is the person? What services are available and suitable to enhance job readiness? Taking into account the local labour market, what is the best employment plan for this person? This assessment is an ongoing process beginning at the intake screening; • Appropriate referrals, support and encouragement, and follow up with the referral on progress of the participant's employment plan i.e. Employment Assistance activities and Community Placements; • if the participant is not job ready or employable, for medical reasons, medical referrals or referrals to ODSP are made and followed up by the case manager; • assistance with special items such as Employment Related Expenses, Employment Start Up Benefit, Child Care, to support the employment plan; and • job matching and Employment Placement "OWT is a tool intended to facilitate matching clients to available jobs." OWT assists the case manager in identifying employability issues and suggests local training and employment assistance activities which may assist the participant in overcoming the identified barriers. OWT allows the referrals to be made and to BF the case for follow up on the outcome of the referral. Referrals to Community Placements may also be made on the		Generally the service provider gets paid based on enrollment with some guidelines around non-attendance, sick time, holidays etc. Monthly attendance numbers are reported to the CMSM as an accountability mechanism. If there was a problem or special circumstance with a program or service provider, they may be paid based on the number of days that a child attended the program. If the child consistently did not use the child care space the service provider would alert the CMSM. In the case of OW informal care, the client must provide receipts for child care services.		Supports and Community Relations activities vary in the projects throughout the province. They are designed to meet the needs of the resident population. In some cases a service agency, for example March of Dimes may provide support for the residents independent from the provider. The activities offered include, but are not limited to; social work services, tenant/member relations, handicapped supports, community gardens etc. In non profits, case management and tenant/member relations are not a mandated service; however many supports are provided informally . A Community Relations Worker is available in supportive housing as well as in the LHAs.

PART IV (c) Case Management and Tenant/Member Relations					
ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	system. OWT assists the case manager in matching clients to available jobs. To promote successful outcomes, the case manager develops strong linkages with agencies providing employment assistance activities as well as communicating clearly to support the participant in their plan. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL :** • province wide data base will facilitate sharing of information and the transfer of files between offices • third party interfaces will provide information/verification for case management The following key changes have been made to the SPECIAL ITEMS REQUEST PROCESS: • All requests will be processed through the common database. • Workers can determine eligibility, process request and review status of request online • OW Discretionary items list will be available online for ODSP/OW offices • Common database will help reduce ineligible clients from receiving benefits. The use of the MOH card for Drug benefits will allow clients to use any pharmacist. It will also allow for more up to date information to be provided to the MOH and the pharmacies since clients could have their health benefits terminated in mid-month.				

PART IV (d) Providing Program Information and Referrals

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The delivery agent will provide additional information about the local labour market and about resources and services in the community to applicants or participants to assist them in meeting eligibility requirements or to become involved in employment measures. The delivery agent will communicate information accurately, comprehensively, quickly and clearly. The opportunity for applicants or participants to resolve issues and/or provide new information formally or informally must be available, known and accessible to the client. The delivery agent also has a role to help identify and recognize where services and resources are not available or are limited for participants or do not meet the local labour market demands.	Part IV (c) Case Management cannot be divorced from providing information and referrals as the latter are based on a solid assessment of the client's situation and needs. Accurate information and referrals, communicated clearly, are critical for the client to move along their employment path, or to pursue other resources they may be entitled to i.e. training subsidy, new programs etc. Inaccurate or untimely information results in added frustration and a sense of failure for the client, adversely affecting their case plan, and ability to continue with it. A number of methods are used to keep case managers current on community information and referral sources. It is an expectation that staff provide information, and make accurate and timely referrals in 'clear language', and these elements form an important part of the case file review. Information and referrals may or may not be related to eligibility i.e. Public Health, Resource Centres at local offices etc. Municipal staff are involved in or initiate community service coordination committees, or working groups with their community partners to ensure services are available to all who require them. The Information Sharing and Fraud Control Unit : • is responsible for setting up information sharing agreements and are a central contact for other jurisdictions i.e. CPP, OAS, Revenue Canada, etc. and works corporate-to-corporate to assist the field to set up information sharing arrangements **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • Intake Verification Interview will minimize data collection function • Emphasis on providing information and referrals and engaging the participant in plan leading to self-sufficiency		CMSMs who administer subsidy have direct relationships with the agencies/licensed day care providers in their community. Most are able to provide in depth information to the families on child care services in their neighbourhoods. Agencies such as community information centres and Child Care Resource Centres often provide information on available child care resources.	See Part IV (c) Case Management and Tenant/Member Relations.	

PART IV (e) Risk Assessment Tools

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Financial eligibility will be completed at 12 months and employment reviews at regular intervals at least every three months. An 'Application for Assistance' including a Participation Agreement, is completed at each financial review to update the participant's file. *The delivery agent is required to ensure:* • *that assistance is directed to those most in need;* • *eligibility for financial assistance is received every 12 months, or as necessary; and* • *accountability for public funds.*	Delivery sites ensure assistance is issued in accordance with the Act and regulations through the completion of the Enhanced Verification process, quarterly, random case file reviews , quality assurance, and internal and external audits. The ministry employs Program Review Officers to examine/audit files and report on compliance. The Ministry has initiated a program to assess risk factors called Consolidated Verification Process (CVP). This method of reviewing files according to the level of risk replaces a 'time-based' file review method. This method will: • identify cases which are most at risk using risk assessment criteria including; income, assets, family status/living arrangements; • consolidate and streamline the best features of early verification processes; • include third party verification, such as consumer credit reports, information from other govt. agencies, source information on assets- banks, insurance; • include new tools for priorizing reviews and tracking case information. • NOTE: only risk factors associated with financial eligibility are identified here. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: • support current practices and CVP initiatives.	There is no provincial model or tools for risk assessment.	Some CMSMs do identify certain high risk groups which they monitor more frequently (e.g. self-employed, parents looking for work).		Cases are monitored on a "time-based" system, i.e. on the anniversary date. Tenants/members paying minimum rent who have declared "no income", or "social assistance" are monitored more closely for changes in their income status. LHA has discretion to monitor cases more closely based on certain income factors i.e. temporary or irregular income, etc.

PART IV (f) Consequences of Not Reporting Changes

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The administrator shall determine that a person is not eligible for income assistance if the person fails to provide the information the administrator requires to determine initial or ongoing eligibility for income assistance, including information with respect to the receipt or expected receipt of income or some other financial resource. *When a person is required to complete and return a monthly report and fails to do so, the administrator may determine that the person is ineligible for income assistance.* *If an amount has been provided to a recipient under the Act in excess of the amount to which the recipient was entitled, the amount of the excess is an overpayment.* *If a recipient or a dependant fails to honour an assignment or an agreement to reimburse the delivery agent, the prescribed amount is an overpayment. See Part IV (i) Recovery of Overpayments/Arrears.*	Currently, the case manager will determine if the non-declaration of income included an intent to defraud the system. In order to make this determination the case manager reviews the history and circumstances of the case with their supervisor. If it is believed that there may have been an intent, then the case is referred for investigation to the Eligibility Review Officer. See Part IV (l) Fraud Reporting and Control. If the case manager and the supervisor do not believe that there was intent to defraud the system, the decision may be made to assess an overpayment and recover this money from the client. See Part IV (i) Recovery of Overpayments and Arrears. Overpayments are assessed as though the client had in fact declared the income for the time period it was intended for i.e. if there were earnings for June, July, and August, earnings exemptions would be applied, assistance recalculated for those months, and the difference between what the client actually received and the amount they should have received considered an overpayment. **BTP KEY CHANGES:** • support current practices • history of overpayment and overpayment reason will be retained		CMSMs develop their own guidelines. Payments are made directly to the service provider on behalf of the family. The parent receives service in kind, not a direct payment. In many cases the change that would make them ineligible is unemployment and recovery of funds would be difficult. If it was discovered that a family had income or assets in excess and there was a clear intention to defraud, the CMSM would use the process and resources of the OW system to recover funding (e.g. EROs).	*If the required documentation is not provided, the tenant is issued a Notice of Rent Increase. The rent specified is equal to the market rent for the unit.* *This notice should be accompanied by a letter explaining that the tenant is required to pay market rent unless the required documentation is provided.* *When the tenant provides the required information, the monthly rent can be readjusted to the appropriate rent-geared-to-income level.* *If the information is provided, but not in time for the 90 day notice, the rent can be adjusted to the appropriate level (if the increase is due to an increase in income, an immediate adjustment can be made).* *Under the TPA misrepresentation of one's circumstances is grounds for dismissal.*	The notification of the annual review includes a date by which the required information is to be returned. If the RGI household does not provide the required documentation by the date specified, a notice of rent/housing charge increase is issued equal to the full market charge for the unit occupied. This notice is accompanied by a letter explaining that the tenant/member is required to pay the full market charge unless required documentation is provided. When the information is provided, the monthly rent/housing charge is readjusted to the appropriate geared-to-income level based on the household income. A written verification of rent-geared-to-income is provided to the household.

PART IV (g) On-going Co-Payment/Rent Collection

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
		A parental contribution is required when available daily income as calculated using Form 1 is greater than the daily cost of the child care program multiplied by the number of days for all children in the family enrolled in child care. *CMSMs may count the parental contribution from parents in need as part of their 20% cost sharing with the Province.*	Based on the level of subsidy provided by the CMSM, service providers collect parent fees for the outstanding balance of the cost of child care. In some cases, the CMSM may collect the parent fees directly. In some cases CMSMs directly operate child care centres/programs and would directly collect parental fees. Regardless of the result of the needs test, some CMSMs charge a user fee to all parents, including those who are eligible for full subsidy. MCSS encourages CMSMs to adopt parent fee practices that ensure subsidized parents do not pay fees that exceed their ability to pay as determined by the needs test. The minimum amount of user fee varies greatly. (e.g. $1 per day, per child or $50 per month per family)		Rent is paid from the tenant/member to the provider according to their lease agreement. The balance of the subsidy is paid to the provider by the province.

PART IV (h) Automatic Late Payment Notices

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
	See Part IV (i) Recovery of Overpayment/Arrears, for late repayments of overpayment amounts for cases no longer in receipt of Ontario Works.		Generally payments from parents (if any) are collected by the service provider. The client would be subject to the late payment rules set by that individual provider. In some cases CMSMs directly operate child care centres/programs and would directly collect parental fees.	*Eviction notices are issued according to the Tenant Protection Act, when payments are delinquent.*	

PART IV (I) Recovery of Overpayments/Arrears

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Where a participant has received financial assistance which he or she was not eligible to receive, an overpayment will be established and the recovery of the overpayment will be done effectively and fairly. *All overpayments are subject to recovery.* *Only under exceptional circumstances will an overpayment be considered uncollectible.* *The RATE OF RECOVERY will be 10% of the income assistance. This amount may be reduced to 5% if it will cause undue hardship.*	Currently, an overpayment is created by invoking the retroactive budget calculation function (e.g. input income for past time period), or by a manual process where the overpayment amount, type and recovery rate is input by a case manager. This information is uploaded through CIMS and the overpayment appears on the file. The overpayment is collected as long as the recipient remains on assistance. The Ontario Works Act allows recovery of overpayments between programs, i.e. between the FBA and ODSP programs and Ontario Works. Where a case is closed with an outstanding overpayment, the Act allows the delivery site to proceed to court (Small Claims Court for amounts up to $5,000.) for collection. This is usually a last resort after attempts to contact the client and arrange a reasonable repayment plan have been unsuccessful. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • a single province wide database will simplify processes for tracking and collecting overpayment balances as clients move between OW and ODSP programs and between Consolidated Municipal Service Managers. Administrative effort will be reduced and the process to collect overpayments will be improved. • Retroactive Budget Calculations (RBC's) will continue to be supported. This involves a change in the client's circumstances resulting in a budget adjustment. This can result in two main outcomes which will impact the client financially: creation of arrears or creation of an overpayment.	*Overpayments are often detected during the file review. The CMSM should establish an overpayment policy. Prorated transition payments to enable parents to repay the overpayment for a specified period can be considered.*		*RENT/OCCUPANCY CHARGE DEFERRAL is a way of dealing with a difficult financial situation caused by a delay in income. Deferral is different than forgiveness because the deferred rent/occupancy charge is expected to be repaid when the delayed income is received.* *Rent/occupancy charge deferral is always partial, because the rent/occupancy charge can never be reduced below the minimum rent of $32.00.* *Deferrals require a written deferral agreement specifying:* • *reason* • *amount of the deferred rent/occupancy charge, and* • *the expected date of repayment* *There are two basic types of rent/occupancy charge deferrals* 1. *Deferral based on the delayed sale of a residence* 2. *Deferral based on hardship i.e. lengthy delay of OAS* OHC Rent forgiveness may be used to temporarily reduce the amount the tenant/member pays in rent. Normally, rent forgiveness takes effect in the month following notice/verification of income reduction. Rent forgiveness cannot be used to reduce the rent below the minimum rent of $32. If the tenant/member experiences an increase in income, the forgiveness should be reduced or withdrawn in the following month. LHA's have the discretion as to whether the income should be verified every month, two months or quarter (the rent forgiveness is not repaid by the tenant/member).	The occupant may seek approval of a rent/occupancy charge deferral by the Non-Profit Corp./Co-operative Board of Directors. The occupant may seek approval of a rent/occupancy charge deferral by the provider. The provider may determine that the financial hardship still exists after the deferral agreement expires. In this case, the provider may extend the agreement for another fixed period, subject to the occupant continuing to be eligible for RGI housing and review of the financial hardship. The Non-Profit Corp./Co-operative may determine that the financial hardship still exists after the deferral agreement expires. In this case, the Non-Profit Corp./Co-operative may extend the agreement for another fixed period, subject to the occupant continuing to be eligible for RGI housing and review of the financial hardship .

PART IV (j) Consequences of Late Co-payments/Rent Payments

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
	Not applicable		See Part IV (h) Automatic Late Payment Notices. If parents consistently do not pay they may be discharged from the centre and legal action may be taken by the provider.	*Late and consistently late rent payments are grounds for eviction under the Tenant Protection Act.* *See Part IV (h) Automatic Late Payment Notices.*	

PART IV (k) Eviction, Cancellation/Reduction of Benefits/Subsidy

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
If an applicant, participant or dependant fails to comply with or meet a condition of eligibility in this Act or the regulations, the administrator shall, as prescribed: • *Refuse to grant assistance.* • *Declare the person ineligible for assistance for the prescribed period.* • *Reduce or cancel assistance or that part of it provided for the benefit of the person who has failed to comply.* *An administrator shall give notice to the applicant or participant of a decision that may be appealed and the notice shall advise the applicant or participant that he or she may request an internal review of the decision.*	Currently, eligibility is usually reduced due to increased income. Correctly coding the income type and where terminated, using the correct termination codes, maintains system integrity and statistical information can be generated to support outcomes. In all cases the information regarding the change/termination of benefits is quickly and clearly communicated to the client in writing. See Part III (p) Client Notification and (q) Dispute Resolution/Appeals regarding communications to participants. When cases are closed, the appropriate code and documentation including reason, effective date, and notification date for the closing are to be input to the narrative in the file. Where the closing is due to death, the case manager must obtain proof of death, and make provisions for payment to the estate, or for burial, if requested. It is important for case managers to correctly input codes to identify income from employment to measure employment outcomes, and to identify information regarding non-compliance in the event of re-application for assistance. Any outstanding follow-up must be completed, including: • establishment of an overpayment and recovery process, • financial tracking of employment placement, • cancellation of assigned family support, • consideration for temporary care assistance if appropriate, and • tracking of case for purposes of discharging a lien. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL** : • current practices will be supported as well as providing enhanced termination reasons and automating the process of notification of eligibility decisions • enhanced termination reasons notification of decisions is automated • notification of decisions is automated	*For policy changes that may result in an applicant's/recipient's file becoming ineligible, the CMSM may want to extend a transition or grace period, not less than six months, to enable families to adjust to the change in financial assistance.* *New provincial guidelines on this issue will be released shortly.*	CMSMs may have their own guidelines regarding cancellation of benefits for reasons of fraud, parental unemployment or non-attendance at school. A reduction or termination of subsidy would usually be based on a new Form 1 being completed with a documented increase in income or assets or decrease in monthly budgetary needs. Unemployment – Most CMSMs have a grace period to allow a parent who is unemployed to search for work and keep stability in their child care subsidy/arrangements. Students – Some CMSMs would consider breaks in school as an opportunity to job search and would allow subsidy to continue. Other CMSMs would stop child care subsidy over a school break and begin it again when the student-parent returns to school. Fraud – In most cases CMSMs would terminate subsidy with a short notice period to the child care provider/program. In cases where a child or family is asked to leave a child care program, (for a variety of reasons), a CMSM would attempt to negotiate a solution between the family and the program and, failing this would attempt to find alternate arrangements rather than having the family lose subsidy.	*OVERHOUSED TENANTS WHO REFUSE the appropriate number of offers will be served with a Notice of Termination under paragraph 2 subsection 60(1) of the Tenant Protection Act. In the non-profit system, rent would be increased to market rent.* *See Part IV (h) Automatic Late Payment Notices.*	

PART IV (I) Fraud Reporting and Control

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Each delivery agent may establish a local fraud control unit. *A fraud control unit may investigate eligibility of present and past applicants and recipients, including possible violations of the Ontario Works Act and related prescribed Acts.* *Persons engaged in investigations for the purposes of fraud investigation shall be deemed to be engaged in law enforcement for the purposes of the Freedom of Information and Protection of Privacy Act (FIPPA) and the Municipal- Freedom of Information and Protection of Privacy Act (M-FIPPA).* *An Eligibility Review Officer has the prescribed powers including the authority to apply for and act under a search warrant.*	Currently, allegations of fraud may be received by the OW office from various sources, e.g. members of the public, calls to the Welfare Fraud Hotline, OW staff, etc. Upon receiving the allegation it is verified that the person is on the OW database and that the reported information is not known to the case manager, and is relevant to eligibility. The case manager reviews the file, interviews the client and discusses the case with a supervisor to determine if the case should be referred to an Eligibility Review Officer (ERO) for further investigation. Once the investigation is complete, the ERO prepares a written report of the investigation indicating whether or not the allegation was confirmed. The report also contains recommendations to the ERO supervisor in regard to ongoing eligibility, overpayment or arrears, and the alleged fraud. If the allegations are confirmed, a decision is made as to whether to refer the matter to the police. The ERO supervisor examines the report to determine if the file contains any elements indicating the intent to defraud. Cases of apparent fraud may be referred for investigation under the Criminal Code of Canada to the police. Part or all of the file may be released to the police on the authorization of the administrator. A duplicate master file is created in order to maintain a working file at the OW office. In order to process social assistance fraud cases efficiently, delivery agents consult with the local police and Crown Attorney's Office to develop a local protocol for the effective investigation and prosecution of social assistance fraud. After the case has been referred to the police, the ERO monitors the referral, to determine the status and matters such as court dates and disposition of the case. Where there has been a conviction of fraud, the ERO is responsible for obtaining a certified copy of the Certificate of Conviction from the Court, and placing it on the client's file, and making the appropriate entries in CIMS/MAIN and the Welfare Fraud Control Database.	*There are no provincial standards*	CMSMs may have their own guidelines. Generally all CMSMs have a process in place to review cases and document fraud. Progressive methods are often used including requesting that the family repay the CMSM for the costs of the child care provided to them. In some cases the CMSM may use the ERO unit in OW for consultation or to pursue fraud cases. In rare cases this may include pursuing the fraud charge through the courts. Because child care subsidy flows directly to a third party (i.e. a child care centre or home child care agency), pursuit of fraud charges and recovery of costs is complex.		Providers most often receive informal complaints from other tenants members. The provider usually discusses the complaint with the resident at the next review. If the provider is informed that an extra person is residing in the unit, for example, the provider would follow-up immediately by monitoring the parking lot, asking the person for identification, verifying their address etc. In the HA system staff inspect complaints. If a violation is found, for instance an extra person moved in three months ago, the rent would be adjusted considering the extra income and this amount would have to be paid. If it wasn't, the TPA would be invoked.

PART IV (I) Fraud Reporting and Control					
ONTARIO WORKS		**CHILD CARE**		**SOCIAL HOUSING**	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
	Where an overpayment is justified and the decision is not to proceed with fraud charges, the client will be advised of the overpayment amount and reason. See Part IV (f) Consequences of not Reporting Changes, and Part IV (i) Recovery of Overpayments/Arrears, for the overpayment recovery procedure. Where restitution has been ordered the ERO takes the appropriate steps to ensure the orders are collected. The Information Sharing and Fraud Control Unit of the ministry is mandated to provide leadership to the information sharing and fraud control function. • A chronological narrative is maintained by the ERO reflecting dates and times of evidence received on file and the outcomes of such documentation. If sufficient evidence cannot be gathered on a case to proceed with the fraud allegation, the file may be closed with no change or an overpayment may be set for the participant/client. • If the ERO collects sufficient evidence to substantiate the allegation of fraud, a recommendation is prepared for approval and a fraud file is presented to the Police and the Crown Attorney. Local protocol surrounding the Police and Crown acceptance of cases will be established so EROs can be confident that files presented for prosecution will be accepted and prosecuted in a timely manner. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • BTP will incorporate the Welfare Fraud Control Database (WFCD) into the new system. • ERO functions (i.e. investigation notes, letters) will be enhanced in the new system.				

PART V (a) Decision Making Principles

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
1. Worker effort should focus on enabling participants to participate actively in determining and taking steps that represent the shortest route to employment for the individual participant and on other measures to support system integrity. *2. Services must be evaluated on the quality of response and speed of turnaround time for:* - *Eligibility decisions;* - *specific program and referral services that meet participants' needs and circumstances;* - *receiving and acting on changes in participant circumstances* - *providing information; and* - *participation-related expenses and child care.* *3. Decisions and resources must be directed to participants based on the Act, directives and locally set priorities concerning:* - *who will access employment opportunities and financial supports; and* - *an efficient and effective internal review process for considering new participant information.* *4. Service delivery must be based on a collaborative model that maximizes the use of cost-effective and expert resources located in the local community, and streamlines and rationalizes the use of services.* *5. Delivery is reviewed and evaluated based on outcomes for organizations and individuals, aligning outcomes with the overall objectives of the business.*	The processes which characterize these principles are illustrated throughout this matrix as per the OW Directives and most, but not all principles are addressed in this document. These processes describe 'how' the various directives and regulations are delivered. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** Priority Ranking will drive the frequency of case reviews. Cases with a high priority ranking will be reviewed more frequently than cases with a low priority ranking. Program integrity will be improved as a result of case prioritization and consistent application of policy. Staff will follow a standardized process for eligibility reviews.	*Policies should be established that ensure a clear audit trail exists and that the potential for conflicts of interest in conducting assessments or review is eliminated. This policy should include:* - *Ensuring that the staff administering the needs test and those who approve the subsidies are different parties; and* - *Copying client source documents and keeping them on file so that future interviewers can ascertain the existence of the documents.*		*In the non profit system, the Board of Directors have discretion to set policy when there is no specific provincial legislation or direction.* *In OHC the LHA boards are responsible for setting local operating directions. LHA has discretion where there is no specific provincial legislation or direction.*	

PART V (b) Standards, Authority, Delivery, Performance Measures and Reporting

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**

Each delivery agent is responsible for the administration of this Act and the provision of employment assistance and basic financial assistance in the delivery agent's geographic area.
A delivery agent shall meet the prescribed standards in its performance of its functions and follow the prescribed procedures and practices.
A delivery agent shall have the prescribed powers.
STANDARDS-The directives outline program standards to which delivery agents are expected to adhere. Each directive includes standards which are applicable to the specific function described in that directive. The standards are generally grouped into the following areas and include standards for the content of staff training:
• *the delivery of employment-focused services;*
• *accountability for social assistance funds;*
• *system effectiveness; and*
• *information management .*
AUTHORITY-The Ontario Works Act provides a legislative framework for the vision of this program assistance in Ontario. The directives provide an overview of the powers and duties of the Minister, Director and Administrator under the Ontario Works Act and regulations and specify the delegations of authority.
DELIVERY-The Act specifies the types of assistance that every Ontario Works delivery agent must provide. Delivery agents include consolidated municipal delivery sites and First Nations. There are two types of assistance, employment assistance and basic financial assistance.
PERFORMANCE MEASURES AND REPORTING-Performance measures are central to the accountability process, and are based on outcomes. To ensure that delivery agents are accountable for the delivery of OW, funding is based on performance.
	STANDARDS
	Currently, the procedures outlined in this matrix reflect the standards in the directives. Delivery agents ensure standards are maintained through systematic and random case file reviews, monitoring of internal reviews and appeals, training, and quality assurance programs. The ministry ensures standards are met through program reviews and analysis of statistical reports.
	AUTHORITY- The directives outline the powers and duties of each designation, identify where delegations are required and establish provincial standards for completing a delegation. Authority and duties of positions are reflected in the position descriptions drafted by delivery agents. They reflect the delegations of authority in the directives.
	DELIVERY- The processes by which financial assistance is delivered under OW are outlined in this matrix. The provision of employment assistance is mandated with basic financial assistance. However, the focus of this matrix is not employment activities.
	PERFORMANCE MEASURES AND REPORTING- Performance measurements are heavily based on outcomes, which measure the success of returning people to employment and reducing costs. Reasons for termination must be recorded accurately to ensure that the program is credited for the resources utilized in assisting a participant into employment. For instance, if a participant does not submit an income statement and the case manager does not follow up, the termination reason may state "closed for no information" rather than "closed due to employment". The delivery agent's
		LEGISLATIVE AUTHORITY
		The Day Nurseries Act and Regulation 262 made under the Act provide the legislative framework for child care in Ontario.
		Specific sections of the legislation and regulation relate to determining available income and eligibility for fee subsidies. These sections indicate how funds are allocated to CMSMs for the provision of day nursery services. This includes children with special needs, (handicapped) families with demonstrated financial need and recipients of Ontario Works who qualify for child care.
		CMSMs report on Fee Subsidy information through the "Delivery Agent Purchase of Service" data elements. This information is provided to the Ministry on a quarterly basis.
		CMSMs are responsible for complying with the Ministry's transfer payment business process and financial policies which include:
		• *Frequency and timing of reporting*
		• *Service data elements:*
		  • *Number of children served*
		  • *Number of children with special needs (handicapped) served*
		  • *Number of families served*
		  • *Number of full day equivalent spaces provided*
		  • *Number of full day equivalent*
				RECORDS, FINANCIAL MANAGEMENT AND STATISTICAL DATA on housing demand that:
				1. Each co-ordinated access system shall have clearly written policies which specify the functions and structures of the coordinated access system. It shall maintain records of its:
				• *policies and procedures*
				• *organizational structure and governance*
				• *bylaws, letters patent, mission statement etc*
				• *maintenance and storage of applicant information*
				• *statistical data on housing demand in the geographic area*
				• *information and data required by Board of Directors of participating non-profit and public housing providers*
				2. Sound financial and bookkeeping practices shall be maintained and auditing requirements fulfilled. There shall be administrative systems for storing and retrieving documents related to the operation of the access system.
				In the case of an Advisory committee, the sponsorship of an incorporated non-profit/public organization shall be secured to ensure that sound business practices are followed.
					Each housing provider will decide if the coordinated access system will maintain its waiting list and/or select residents on its behalf. Whether these tasks are handled by the coordinated access system or the provider, the requirements must be met:
					• before executing a lease, income is verified and rent/occupancy charge calculated;
					• prior to occupancy, a lease is executed between the resident and the provider;
					• a strategy for filling market units is implemented;
					• accounting and other records are maintained;
					• waiting list, targeting, turnover and vacancy information is available to the provider's Board;
					• program reporting requirements are met.
					OHC has a "best practice team" which identifies good business processes. OHC is in the process of implementing a performance management system for the local housing authorities. Vacancy rate, unit turnaround time, arrears and manageable costs will be monitored.

PART V (b) Standards, Authority, Delivery, Performance Measures and Reporting

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
This means that delivery agents receive payment from the province based on agreed-upon targets or units of services required. *A delivery agent will be held accountable for the targets negotiated in its service contracts. Ministry funding for employment assistance costs is tied to agreed -upon targets in the areas of Community Participation hours of placement, number of participants receiving Employment Supports, number of participants finding employment and leaving OW due to Employment Placement, supports to self-employment, and the reduction in welfare spending as a result of these activities.*	funding is tied to program participation and detailed processes have been developed to ensure that delivery agents are able to report on their successes, in order to meet their agreed upon targets. This is an ongoing process that is used to ensure the integrity of the OW program across Delivery Agents/Local Offices: • Develop Workplan • Prepare for Review • Conduct Review Review Findings and Create Action Plan. **KEY FEATURES OF NEW SERVICE DELIVERY MODEL**: • Key Performance Indicators (KPIs) and reports will be available to allow CMSMs to monitor their performance.	*spaces for special needs children* *• Average per diem* • *Reporting on standard forms* • *Reconciliation and audit requirements* *To manage funds CMSMs will:* • *Monitor the use of funds with service providers on an annual basis* • *Monitor reconciled funds with service providers based on an audited statement* • *Meet performance targets before managing funds elsewhere in the child care envelope*			

PART V (c) Front Line Staff – Qualifications and Training Requirements

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Each delivery agent is responsible for the administration of this Act and the provision of employment assistance and basic financial assistance in the delivery agent's geographic area. *A delivery agent shall meet the prescribed standards in the performance of its functions and follow the prescribed procedures and practices.* *A delivery agent shall have the prescribed powers.* *An administrator may, in writing, authorize a person or class of persons employed by the delivery agent for the purposes to exercise any of his or her powers or duties under his or her supervision and direction.* *A decision made by a person exercising the administrator's powers or duties shall be deemed to be a decision of the administrator.* *Each directive includes training requirements which are applicable to the specific function described in that directive. The training required for staff to effectively perform that particular function are specified in the directive. Staff qualifications are not specified in the directives.*	The directives provide the basis for a comprehensive training program and a training standard for delivery agents in preparing staff to perform the necessary functions of delivery. These training requirements may also be used as a basis for performance appraisals. Delivery agents exercise discretion in determining staff positions and the duties of those staff. Delivery sites also exercise discretion in determining the qualifications required of their staff. This may be dependent on the size of the delivery agent and/or how the work is divided among their staff resources. There may be specialized workers/departments for some functions i.e. overpayment recovery, ERO, FSW, Youth workers, Employment Assistance workers etc. Often qualifications are prescribed in collective agreements. The formalization of training programs varies among delivery sites. Where sites do not have in house trainers, training can be purchased externally through organizations such as OMSSA.	*There are no provincial standards for staff who administer the Form 1 (fee subsidy test).*	There are no formal qualifications or training required for financial testing. Individual CMSMs establish their own basic qualifications for hiring new staff. Staff qualifications for this function vary across the province. Larger CMSMs may develop their own training programs for new staff and ongoing training to update staff on financial testing. In very small municipalities child care subsidy calculation may be only a portion of a full time equivalent position. This worker may be responsible for establishing financial eligibility, matching the family to a child care program and monitoring eligibility and the contract arrangement with the service providers. In other situations (especially large municipalities), staff may specialize, working only on financial testing. There may even be more specialization by establishing specific caseloads (i.e. self-employed).		A number of training sources are available to providers and OHC staff: • Institute for Housing Management offers accredited courses • OHC offers twice yearly business meetings at which best practices are discussed • Ministry regional offices offer RGI training for non-profits • CHF provides on going training to its membership • ONPHA offers training and supports to its membership

PART V (d) Staffing Resources

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
Each delivery agent is responsible for the administration of this Act and the provision of employment assistance and basic financial assistance in the delivery agent's geographic area. A delivery agent shall meet the prescribed standards in the performance of its functions and follow the prescribed procedures and practices. A delivery agent shall have the prescribed powers.	Delivery sites have discretion over the way in which delivery functions are divided. This also affects caseload to worker ratio. Delivery agents receive subsidy based on provincially recommended caseload ratios only. Provincial/municipal service agreements vary with each CMSM regarding caseload levels.	The completion of the Form 1 must be administered by CMSM staff specifically designated to process the applications. To avoid conflicts of interest, staff that process applications must be different from those who sign off. Child care centre staff should not be involved in the application process. There is no provincially recommended caseload ratio.			Manageable cost ranges, budget reviews and cost constraints all have a role in controlling the number of staff in housing units.

PART V (e) Office Procedures and Mechanisms

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
Each delivery agent is responsible for the administration of this Act and the provision of employment assistance and basic financial assistance in the delivery agent's geographic area. *A delivery agent shall meet the prescribed standards in the performance of its functions and follow the prescribed procedures and practices.* *A delivery agent shall have the prescribed powers.*	Some CMSMs have an internal review process to ensure assistance is being provided in accordance with the Act. There is a provincial process in place to review the administration of the Act. Delivery agents establish procedures to process and monitor work flows within their jurisdictions. Processes currently vary from one CMSM to another. With the introduction of the new Service Delivery Model (SDM), many of the office procedures and business practices will become consistent across the province.	*No Provincial standards.*	CMSMs are responsible for setting their own procedures.	The coordinated Access System has the most well established and standardized set of procedures in each area. (These vary from area to area). See Part II (a) Waiting List Management.	

PART V (f) Standardized Forms

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
An application for financial assistance shall be made to the administrator in the form and manner approved by the Director. *The administrator may require an applicant to provide information necessary to determine the applicant's eligibility for basic financial assistance, including (prescribed) information with respect to any member of the benefit unit.*	The following is a list of ministry standardized forms for use in the OW program. Delivery sites may use supplemental forms as well: • Application Form (includes Part I – Financial Eligibility, Part II Participation Agreement) • Form#3 Consent to Disclose and Verify Information • Form #4 Medical Report • Form#5 Application for Assistance (1A) • Consent to Obtain Information (1006) • Consent to Release Information • Application For Temporary Care • Assignment • Direction • Agreement to Reimburse • Employment Insurance Inquiry • Assignment of Benefits (EI) • Assignment and Direction • WSIB Assignment • CPP Assignment and Authorization to Communicate Information • Support Assignment • RRSP Verification Form • Cohabitation Information Sheet and Questionnaire • Declaration for Support and Maintenance (DSM) • Request for Sponsorship information • Referral to Family Support Worker • FRO (Family Responsibility Office) Assignment • Direct Deposit Information • School Attendance Form • Appointment of Trustee • Verification Checklist • Rights and Responsibilities	*The only regulated form related to determination of eligibility for fee subsidy is Form 1.* *The information in the regulated Form 1 must be completed for fee subsidy applications. Under no circumstances can the information requirement contained in the Form 1 be substituted or omitted (for example, completion of the Consent to Inspect Assets). The Form 1 information must be on file for all families who are receiving a fee subsidy.*	CMSMs have developed a wide range of internal forms to support their business processes, (especially for self-employment, assets, income etc). The Service Manager's Module for Child Care is automating the Form 1 and also has a number of screens and reports that support the administration of child care subsidy .	*There are no prescribed forms, and providers are free to develop their own.* *Within each Coordinated Access Centre there is a common set of forms for all SH in that area.* *OHC has developed standardized rent supplement agreements as well as private agreements.* *Non-profits develop their own forms with clauses which must be included which are provided by the province.*	*A typical RGI occupant file contains:* • *geared-to-income application* • *income verification for original agreement* • *rent/occupancy charge calculation sheet* • *original lease/occupancy agreement* • *notice of annual income and asset review* • *all verification for geared-to-income payment* • *notice of rent/occupancy charge increase* • *renewal of lease (for non-profits--optional)* • *all correspondence to and from occupant* *NOTE: the geared-to-income occupant file must contain all the verification for the income and assets used to calculate the current geared-to-income payments.* *It must be up to date at all times and provide a proper audit trail.*

PART V (g) Accountability Mechanisms					
ONTARIO WORKS		**CHILD CARE**		**SOCIAL HOUSING**	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
The province is accountable for taxpayers dollars. The Ministry has to set a framework within which all parties involved in Ontario Works must exercise accountability for outcomes that support effective use of public funds. *To ensure that delivery agents are accountable for the delivery of OW, funding is based on performance.* *This means that delivery agents receive payment from the province based on agreed upon targets or units of services required. A delivery agent will be held accountable for the targets negotiated in its service contracts. Ministry funding for employment assistance costs is tied to agreed -upon targets in the areas of Community Participation hours of placement, number of participants receiving Employment Supports, numbers of participants finding employment and leaving OW due to Employment Placement, supports to self-employment, and the reduction in welfare spending as a result of these activities.*	CMSM business plans call for an accountability framework contained in criteria for approval, including local reporting procedures. CMSMs have developed multiple internal data reporting mechanisms.	*The Ministry reviews a representative sample of not less than 5% of all case files for fee subsidies at least once a year. As a best practice, CMSMs should establish and communicate their own internal case file review protocols.* *Protocols may include such aspects as:* • *ensuring file reviews are completed at regular intervals* • *communicating that random file reviews may be conducted* • *ensuring protocols are in place to report the monitoring results and complete the necessary follow-up for noncompliance to program requirements* *Documents related to needs testing must be verified and retained. The retention policy for fee subsidy files requires that closed files are retained on site for the current year and for an additional 2 years, then retained off site in secure storage for 6 years .* *Policies should be established that ensure a clear audit trail exists and that the potential for conflicts of interest in conducting assessments or reviews is eliminated.* *This policy should include:* • *ensuring that the staff administering the needs test and those who approve the subsidies are different parties* • *copying client source documents and keeping them on file so that future interviewers can ascertain the existence of the documents*	CMSMs develop their own review procedures ranging from supervisors signing off all subsidy applications to a random sample review of the work.	*In the non-profit system the Board manages the project according to their operating agreement(s). The Ministry performs compliance reviews to ensure compliance.* *There is a Memorandum of Understanding between the province and the OHC and OHC with each of the housing authorities which sets out the responsibilities .*	

PART V (h) Privacy Requirements and Information Sharing

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
Personal information collected by a delivery agent for the purposes of the OWA may be used by the delivery agent and by the Minister for the purposes for which it was collected or for a consistent purpose or as authorized under the OWA. *Each delivery agent shall keep information collected under the OWA in the form and electronic system required by the Director.* *The Act permits the exchange of information with third parties for administration, law enforcement and research purposes subject to strict confidentiality and privacy criteria. This represents a broadening of powers with respect to information sharing that will allow more reciprocity in the exchange of information with third parties.* *BIOMETRICS The Act makes provision for the use of biometric technologies to support program delivery subject to strict conditions, including privacy safeguards.*	Staff employed by delivery agents are required to sign an 'Oath of Confidentiality' upon hire. The standardized forms which are required both to obtain and disclose personal information regarding a client are listed in Part V (f) Standardized Forms. Delivery agents observe the requirements of FIPPA and M-FIPPA through the appointment of a FIPPA Coordinator. All requests for personal information, not covered by an agreement, are responded to by the Coordinator. INFORMATION SHARING - The ministry will enter into agreements which will apply to all delivery agents, thereby providing a consistent approach to the use, collection and disclosure of personal information. For each information sharing agreement a directive is issued outlining the protocol to be followed. Delivery agents must ensure that agreement protocols are adhered to and that appropriate business practices are implemented. Where no information sharing agreements exist, the collection, use and disclosure of information is limited to provisions set out in FIPPA and M-FIPPA.	*Regulation 262 made under the DNA states:* *No delivery agent, municipality, band, prescribed board or approved corporation shall print for public distribution, broadcast or post up in a public place or cause to be so printed, broadcasted or posted up or otherwise cause to be made public, the identity of any person referred to in a claim, return or report required to be made under the Act or this Regulation who is eligible for or receives assistance under the Act or this Regulation.* *The above does not apply to the exchange of information between a delivery agent, municipality, band prescribed board or approved corporation and the Ministry, the Government of Canada or an agency (including the operator of a day nursery or private home day care agency) in order to verify information for the purpose of determining or verifying eligibility of any person for assistance.* *Compliance with the above are conditions of making any payment to a delivery agent, municipality, band, prescribed board or approved corporation. Any payment owing under the Regulation may be suspended or withheld for failure to comply.*	CMSMs observe the requirements of FIPPA and M-FIPPA through the appointment of a "FIPPA Coordinator" through which all requests for personal information, not covered by an agreement, are responded to. In some cases CMSMs may also require a signed oath of confidentiality upon hiring.	*Non profits do not fall under any of the privacy legislation i.e. FOI, FIPPA, M-FIPPA. There are contractual constraints under their operating agreements, which are contract law, not legislation, which deal with confidentiality.* *LHA's fall under FIPPA*	

PART V (i) Strategies to Improve					
ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS

	Business & Technology Integration Branch (BTIB) includes ; the Automated Social Assistance Program (ASAP), and the Business Transformation Project (BTP). Through BTP, MCSS and Andersen Consulting are developing new business processes and technology. The following represent some of the initiatives of this branch to improve program delivery by:
	• automated time tracking
	• closer links between OWT and CWT
	• improved integrity of data
	• improved validation of records
	• service delivery Model (SDM) will improve client service, program integrity, reduce costs, by including:
	  • a two step intake process
	  • common province wide database
	  • streamlined processes
	  • tools to support workers for immediate eligibility determination
	• clients contact intake by phone and hear key OW messages while waiting for screening
	• applicants who appear to be ineligible are advised at intake screening (and right to proceed)
	• combination of skilled intake screener and system supports will result in fewer applicants continuing to intake verification
	• standardization of a province-wide business process
	• eligibility reviews will be conducted using risk assessment criteria
	• province wide database will facilitate sharing of information and the transfer of files between offices
	• enhanced online notes will assist the case manager in tracking changes, BF activity and appeal status
	• acceptance of information verified by other municipalities
	• streamlined income reporting process
	• automated determination of eligibility and calculation of benefits removes the need for manual assessments
	• increase in worker skills/time spent on decisions requiring judgement/discretion
	• cross program/cross municipal collection of overpayments
			CMSMs have developed a wide range of internal forms to support their business processes, (especially for self-employment, assets, income etc).
			The Service Manager's Module for Child Care is automating the Form 1 and also has a number of management reports that support the administration of child care subsidy by streamlining business practices. Reports are able to give the profile of children and families receiving service along with enrollment summaries and budget analysis.
			Some CMSMs have already established their own automated child care information systems.		

PART V (j) Capacity to Share Client Data and Common Linkages

ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**	**DIRECTIVE/REGULATION**	**PROCESS**
A delivery agent may, with the approval of the Director, enter into an agreement, with a prescribed government body, with respect to the collection, use and disclosure of information. *An agreement under this section shall provide that personal information collected, used or disclosed under it is confidential and shall establish mechanisms for maintaining the confidentiality and security of the information.*	**KEY FEATURES OF NEW SERVICE DELIVERY MODEL:** • A common electronic file accessible by staff throughout the province will simplify the processes required to transfer case information, while reducing the reliance on physical files. Through a common database, the administrative effort required to access client information and transfer cases will be reduced. • Internet-based system • On-demand access to 3rd party information • Access rights are based on job function (i.e. case manager has full access, tombstone data available to other offices)		The Service Manager's Module for Child Care is a computer program which has automated the Form 1 including the full range of required documentation but verification standards are not prescribed. Data includes birth dates, social insurance numbers, marital status and family composition along with liquid assets, monthly income and budgetary needs. (This automated system is under development and is not currently used universally. The Ministry has not yet indicated whether this system will be mandatory but all CMSMs will be required to report on the same data elements as defined by this system.) However this system is stand alone software available to use at each CMSM's site. It is not part of a province wide network. The Service Manager's Module for Child Care has used the same client identifier as OW. However there is currently no linkage between the two systems. Some CMSMs have developed joint CC and OW service delivery with some overlap in computer systems.		The ability to share client data exists within the Coordinated Access Area only.

PART V (k) Technical Process – Management Information and Systems Reports					
ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
	KEY FEATURES OF NEW SERVICE DELIVERY MODEL: – Participants and clients will have the opportunity to enter income directly through an Interactive Voice Response (IVR) system. Verification of income reported by the participant through IVR will be based on risk factors and defined exceptions. The administrative efforts required to record and verify income reports will be reduced. Participants and clients will have the opportunity to access case information through the IVR. Clients will be serviced effectively with faster access to commonly requested case information. Also, the administrative effort associated with responding to client inquiries will be reduced.		The Service Manager's Module for Child Care is automating the Form 1 and also has a number of management reports that support the administration of child care subsidy by streamlining business practices. Reports are able to give the profile of children and families receiving service along with enrollment summaries and budget analysis. Some CMSMs have already established their own automated child care information systems which include management reports. Most CMSMs would have an overall municipal financial system that would provide reports on expenditures by business area.		

PART V (l) Opportunities to Reduce Duplication					
ONTARIO WORKS		CHILD CARE		SOCIAL HOUSING	
DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS	DIRECTIVE/REGULATION	PROCESS
			Service Manager's Module allows for consistently defined data to be entered once and used for a number of purposes including province wide analysis. Entering tombstone data once into a combined municipal system for CC, OW and SH would increase efficiency in the business practices of all three programs. Data accuracy would be increased. One electronic system could utilize Interactive Voice Response (IVR) to streamline data collection, reporting and allow clients access to their own case information.		